

Characterization of pathogenesis of and immune response to *Burkholderia pseudomallei* K9243 using both inhalational and intraperitoneal infection models in BALB/c and C57BL/6 mice

J. J. Bearss<sup>1</sup>, M. Hunter<sup>2</sup>, J. L. Dankmeyer<sup>2</sup>, K. A. Fritts<sup>2</sup>, C. P. Klimko<sup>2</sup>, C. Weaver<sup>2</sup>, R. G. Toothman<sup>2</sup>, W. M. Webster<sup>2</sup>, D. Fetterer<sup>3</sup>, J. A. Bozue<sup>2</sup>, P. L. Worsham<sup>2</sup>, S. L. Welkos<sup>2</sup>, K. Amemiya<sup>2</sup>, and C. K. Cote<sup>2\*</sup>

United States Army Medical Research Institute of Infectious Diseases (USAMRIID),  
1425 Porter Street, Fort Detrick, Frederick, MD, 21702

<sup>1</sup>Pathology Division

<sup>2</sup>Bacteriology Division

<sup>3</sup>BioStatistics Division

\*Corresponding Author. Christopher.k.cote.civ@mail.mil 301-619-4936

Running title: Comparison of *B. pseudomallei* in different mice challenged by different routes

Key words: *Burkholderia pseudomallei*, melioidosis, intraperitoneal, mouse, infection, inhalational immune response

Disclaimers: Opinions, interpretations, conclusions, and recommendations are those of the authors and are not necessarily endorsed by the U. S. Army. Research was conducted under an IACUC approved protocol in compliance with the Animal Welfare Act, PHS Policy, and other Federal statutes and regulations relating to animals and experiments involving animals. The facility where this research was conducted is accredited by the Association for Assessment and Accreditation of Laboratory Animal Care, International and adheres to principles stated in the Guide for the Care and Use of Laboratory Animals, National Research Council, 2011.

1 ABSTRACT

2 *Burkholderia pseudomallei*, the etiologic agent of melioidosis, is a gram negative bacterium  
3 designated as a Tier 1 threat. This bacterium is known to be endemic in Southeast Asia and  
4 Northern Australia and can infect humans and animals by several routes. Inhalational  
5 melioidosis has been associated with monsoonal rains in endemic areas and is also a significant  
6 concern in the biodefense community. There are currently no effective vaccines for *B.*  
7 *pseudomallei* and antibiotic treatment can be hampered by non-specific symptomology and also  
8 the high rate of naturally occurring antibiotic resistant strains. Well-characterized animal models  
9 will be essential when selecting novel medical countermeasures for evaluation prior to human  
10 clinical trials. Here, we further characterize differences between the responses of BALB/c and  
11 C57BL/6 mice when challenged with similarly low doses of a low-passage and well-defined  
12 stock of *B. pseudomallei* K96243 via either intraperitoneal or aerosol routes of exposure. Before  
13 challenge, mice were each implanted with a transponder to collect body temperature readings,  
14 and daily body weights were also recorded. Mice were euthanized on select days for  
15 pathological analyses and determination of the bacterial burden in selected tissues (blood, lungs,  
16 liver, and spleen). Additionally, spleen homogenate and sera samples were analyzed to better  
17 characterize the host immune response after infection with aerosolized bacteria. These clinical,  
18 pathological, and immunological data highlighted and confirmed important similarities and  
19 differences between these murine models and exposure routes.

20

21

## 22 INTRODUCTION

23         *Burkholderia pseudomallei* is the causative agent of melioidosis [1]. It is a gram negative  
24         bacillus that is commonly found in soil and water in Northern Australia and Thailand and is a  
25         known cause of sepsis [2-7]. There is significant recent evidence to support the concept that *B.*  
26         *pseudomallei* may be distributed in tropical locations located throughout the world [8-18].  
27         Melioidosis is commonly initiated from the introduction of the bacterium into a subcutaneous  
28         injury. The Center for Disease Control and Prevention has categorized this bacterium as a Tier  
29         One biological select agent. An infection of *B. pseudomallei* can cause either acute sepsis or a  
30         chronic infection [9, 19-22]. Acute sepsis generally manifests within 1 to 21 days, while a  
31         chronic infections with *B. pseudomallei* is characterized by symptoms that last substantially  
32         longer (i.e. greater than two months). There are currently no effective vaccines for melioidosis  
33         [23], and treatment can be hampered by non-specific symptomology, high frequencies of  
34         naturally occurring antibiotic resistance, and the propensity of the bacterium to cause a chronic  
35         infection that reemerges years (to decades) later [24, 25]. Several factors, including occupational  
36         exposure (i.e. rice farmer in Thailand) alcoholism, or diabetic mellitus have been shown to be  
37         important risk factors for presenting with melioidosis [2, 26, 27]. Of specific concern to the  
38         biodefense research community is the fact that *B. pseudomallei* is known to be transmitted to  
39         humans via inhalation, most often associated with strong rains and winds in geographic areas  
40         where the bacterium is endemic [7, 28, 29].

41         There has been significant effort invested in developing appropriate animal models of  
42         melioidosis (i.e. mice, rats, hamsters, goats, and non-human primates) [30-34]. Small animal  
43         models, specifically the BALB/c and C57BL/6 mouse models, have been used to mimic both the

44 acute and chronic stages of *B. pseudomallei* infection [27, 30, 35-43]. The BALB/c mouse  
45 model results in an acute infection after either intraperitoneal injection or aerosol exposure [30,  
46 40, 41, 44]; while C57BL/6 mice are considerably more resistant to infection and hypothesized  
47 to be a suitable model for chronic infection in both intraperitoneal injection and aerosol exposure  
48 [30, 41, 44, 45]. The BALB/c mouse model is a useful tool in identifying the mechanisms of  
49 virulence of *B. pseudomallei*, as well as for preliminary screening for vaccine or therapeutic  
50 efficacy [30, 35, 39, 46-50]. The disease model is of course dependent upon the different routes  
51 of infection used in these studies (i.e. intraperitoneal or intranasal/inhalation) and may be  
52 dependent upon the *B. pseudomallei* strain used for challenges [46, 50, 51]. These routes of  
53 exposure within the BALB/c mice result in an acutely disseminated infection that mimics some  
54 of the features of human melioidosis. The mice develop numerous abscesses and/or  
55 pyogranulomatous masses in various organs or locations throughout the body (i.e. spleen, liver,  
56 lungs) [46]. Depending upon the dose administered, BALB/c mice can succumb to infection  
57 within 2 to 3 days. The C57BL/6 mice generally clear the bacteria (unless large doses are  
58 delivered) to below the limits of detection in both the spleen and liver within days to weeks of  
59 being inoculated with the bacterium [37, 38]. It has been reported that C57BL/6 mice may  
60 remain asymptomatic for months before spontaneous reactivation of the disease occurs [37]. The  
61 spontaneous reactivation appears in the form of localized lesions (i.e. lesions on the ear, tail,  
62 liver and spleen). The long term latency of the infection in C57BL/6 mice potentially mimics  
63 that of the chronic human illness, although these mice may still succumb to disease within a few  
64 months of infection.

65 The formation of multinucleated giant cells (MNGCs) by infected cells has been well  
66 documented using in vitro assays with macrophage-like cell culture lines infected with

67 *Burkholderia* species [46, 52-56], primary mouse macrophages [57], and nonphagocytic cell  
68 lines [55, 56] MNGCs, referred to as a “hallmark” of *B. pseudomallei* infection [58], have been  
69 reported in other studies of chronic melioidosis in mice [37, 58], Madagascar hissing  
70 cockroaches [59], and in human autopsies [60]. Surprisingly, there are very few descriptions of  
71 MNGCs in mice infected with *B. pseudomallei* [37, 58]. Mouse models will be essential for  
72 preliminary prescreening and subsequent down selection of novel medical countermeasures (i.e.  
73 therapeutics, vaccines, or combination regimens), accordingly; better characterization of the  
74 extent and significance of this phenomenon in mice is warranted.

75 This report adds to the growing body of literature characterizing the murine experimental  
76 models of melioidosis. We show data collected from a head to head comparison between  
77 BALB/c and C57BL/6 mice challenged with either an intraperitoneal injection or by exposure to  
78 aerosolized bacteria using the well-documented *B. pseudomallei* strain K96243. In both cases,  
79 the challenge doses were purposefully low to more fully characterize the disease progression and  
80 to look for signs of chronic infection. Weight and temperatures were recorded daily, bacterial  
81 burdens were determined, and immunological and histological analyses are reported, to depict a  
82 more complete disease model.

### 83 MATERIALS AND METHODS

84 **Animal challenges.** Groups of BALB/c mice (Charles River-Frederick, MD; female 7-10 weeks  
85 of age at time of exposure to bacteria) were challenged by the intraperitoneal (IP) or inhalational  
86 route with *B. pseudomallei* K96243 grown in 4% glycerol (Sigma Aldrich, St. Louis, MO)-1%  
87 tryptone (Difco, Becton Dickinson, Sparks, MD) and 5% NaCl (Sigma Aldrich, St. Louis, MO)  
88 broth (GTB). The bacteria used for challenge were harvested from a late log phase culture

89 grown in GTB medium at 37°C with shaking at 200 rpm. The bacteria were resuspended in  
90 GTB and quantified via OD<sub>620</sub> estimations. The actual delivered doses of bacteria were then  
91 verified by plate counts on blood agar (Trypticase soy agar with sheep blood) plates (Remel<sup>TM</sup>,  
92 ThermoFisher Scientific, Waltham, MA). Each IP dose was delivered in 200 µl of GTB  
93 medium. The IP challenge groups doses were as follows: BALB/c mice received approximately  
94 3.0x10<sup>4</sup> colony forming units (CFU) (approximately 0.49 LD<sub>50</sub> equivalent) and C57BL/6 mice  
95 received approximately 9.2x10<sup>5</sup> CFU (approximately 0.42 LD<sub>50</sub> equivalents) [45, 46]. Exposure  
96 to aerosolized bacteria was accomplished as previously described [61]. Briefly, mice were  
97 transferred to wire mesh cages (up to 10 mice per cage) and up to four wire mesh cages were  
98 placed in a whole-body aerosol chamber within a class three biological safety cabinet located  
99 inside a BSL-3 laboratory. Mice were exposed to aerosolized *B. pseudomallei* strain K96243  
100 created by a three-jet collision nebulizer. Samples were collected from the all-glass impinger  
101 (AGI) and analyzed by performing CFU calculations to determine the inhaled dose of *B.*  
102 *pseudomallei*. The inhalational challenge doses were as follows: BALB/c mice received  
103 approximately 5 CFU (approximately 0.2 LD<sub>50</sub> equivalents) and C57BL/6 mice received  
104 approximately 18 CFU (approximately 0.05 LD<sub>50</sub> equivalents) (Waag and Soffler, personal  
105 communication).

106 Prior to challenge BALB/c and C57BL/6 female mice were implanted with Electronic ID  
107 Transponder –IPTT 300 (Bio Medic Data Systems-BMDS, Seaford Delaware). Mice were  
108 scanned for daily temperatures via Smart Probe SP-6005 (BMDS, Seaford, Delaware) and daily  
109 weights were determined on Adventurer Pro Balance (Ohaus, Pasippany, NJ). These data were  
110 recorded by host DAS-8001 Data Acquisition System (BMDS, Seaford, Delaware) and stored in  
111 Excel format. Mice were monitored for clinical signs and symptoms for 60 days for the IP

112 challenge group and 91 days for the inhalational challenge group. Early endpoint euthanasia was  
113 employed by CO<sub>2</sub> exposure in a uniform manner to limit pain and distress of the mice. For  
114 dissemination studies, mice were euthanized by exsanguination under deep anesthesia on days 0  
115 (approximately 4-6 hours post exposure to *B. pseudomallei*), 2, 4, 7, 15, 22, and 59 post-infection  
116 and lungs, spleen, and liver samples were collected. Tissues were harvested, weighed,  
117 homogenized, and then CFU were enumerated on SBA plates. The limit of detection for spleen,  
118 liver, and lungs was approximately 10 CFU/ml. Due to blood volume constraints, the limit of  
119 detection for blood was approximately 100 CFU/ml. Confirmatory bacterial identification was  
120 also performed using *Burkholderia cepacia* selective agar plates (Remel<sup>TM</sup>, ThermoFisher  
121 Scientific, Waltham, MA). The surviving C57BL/6 mice in the inhalational challenge group  
122 were retained through day 91 in an attempt to identify any signs of chronicity (i.e. clinical signs  
123 such as weight loss, temperature increase, altered appearance, or bacterial burden in tissues after  
124 euthanasia).

125 Research was conducted under an Institutional Animal Care and Use Committee  
126 (IACUC) approved protocol in compliance with the Animal Welfare Act, Public Health Service  
127 (PHS) Policy, and other federal statutes and regulations relating to animals and experiments  
128 involving animals. The facility where this research was conducted is accredited by the  
129 Association for Assessment and Accreditation of Laboratory Animal Care, International and  
130 adheres to principles stated in the 8<sup>th</sup> Edition of the Guide for the Care and Use of Laboratory  
131 Animals, National Research Council, 2011.

132 **Histological pathology.** Post-mortem tissues were collected from euthanized mice and fixed in  
133 10% neutral buffered formalin for ≥ 21 days. Samples were embedded in paraffin and sectioned

134 for hematoxylin and eosin (HE) staining, as previously described [40, 62].  
135 Immunohistochemistry was performed on selected samples as previously described (REF). We  
136 define a multi-nucleated giant cell (MNGC) as a large (>20 $\mu$ m diameter), round to irregular cell  
137 with abundant clear to eosinophilic cytoplasm and having two or more eccentric reniform nuclei.  
138 N = 3 mice for most time points.

139

140 **Spleen cell preparation.** Splenocytes were prepared essentially as previously described [63].  
141 Briefly, spleens were excised from mice (N = 5 mice for most time points), weighed, and  
142 disaggregated in RPMI 1640 medium (Life Technology, Grand Island, NY) containing 25 mM  
143 HEPES, 2 mM glutamine (wash medium) to make the spleen extract. Aliquots of the spleen  
144 homogenate were saved for cytokine/chemokine determination and stored at -70° C. Samples  
145 were irradiated and confirmed sterile before use. CFU in non-irradiated aliquots of the  
146 homogenate were determined on sheep blood agar plates (BD Diagnostics, Franklin Lake, NJ)  
147 with undiluted extract or 10-fold dilutions in sterile phosphate-buffered saline (PBS). Plates  
148 were incubated at 37° C for two days before counting CFU. Red cells in the spleen homogenate  
149 were lysed with ACK (Ammonium-Chloride-Potassium) Lysing Buffer (BioWhittaker,  
150 Walkersville, MD) after the extract was diluted with wash medium and cells pelleted by  
151 centrifugation at 1200 rpm for 10 min. Splenocytes were then washed once and suspended in  
152 complete medium [wash medium containing 10% heat-inactivated fetal calf serum (Life  
153 Technology), 1 mM sodium pyruvate, 0.1 mM non-essential amino acids, 100 U/ml of penicillin,  
154 100  $\mu$ g/ml streptomycin, and 50  $\mu$ M 2-mercaptoethanol and cells counted.

155

156 **Cytokine/chemokine expression.** Cytokines and chemokines in mouse sera and spleen  
157 homogenates (N = 5 for most time points) were measured by Luminex Mag Pix (Life  
158 Technology, Grand Island, NY) as per manufacturer directions. Spleen homogenates and sera  
159 from uninfected mice were used as normal, uninfected controls (N = 10 BALB/c; N = 4  
160 C57BL/6). The levels (pg/ml) of the following 20 cytokines/chemokines were measured: FGFb,  
161 GM-CSF, IFN- $\gamma$ , IL-1 $\alpha$ , IL-1 $\beta$ , IL-2, IL-4, IL-5, IL-6, IL-10, IL-12 (p40/p70), IL-13, IL-17, IP-  
162 10, KC, MCP-1, MIG, MIP-1 $\alpha$ , TNF- $\alpha$ , and VEGF. We did not report all the  
163 cytokines/chemokines because some did not show any change during the study.

164

165 **Splenocyte composition.** Approximately  $1 \times 10^7$  splenocytes from each mouse were washed in  
166 FACS staining buffer (FSB) (1XPBS, 3% fetal calf serum, Life Technologies), and fixed in FSB  
167 containing 4% formaldehyde (Pierce, Rockford, IL) at 4° C. The cells were washed in FSB and  
168 then distributed into a microtiter plate ( $5 \times 10^5$  cells/well), and nonspecific binding was inhibited  
169 by the addition of Fc Block (BD Biosciences, San Jose, CA). Cells were labeled with the  
170 following specific antibodies (BD Biosciences): CD4 T cells, CD4-PE/CD44-FITC; CD8 T cells,  
171 CD8-PE/CD44-FITC; B cells, B220-PE/CD86-FITC; monocytes/macrophages, CD11b-  
172 PE/CD44-FITC; NK cells, CD49b-PE/CD44-FITC; and granulocytes, Ly6G-PE/CD44-FITC.  
173 Corresponding isotype controls were used and all were incubated for 60 min on ice. All samples  
174 were fixed in FSB with 4% formaldehyde and stored at 4° C until analysis. Cells were identified  
175 with a BD FACSCalibur using CellQuestPro software (BD Biosciences). Splenocytes from  
176 uninfected BALB/c mice were prepared as described above and used as normal, uninfected  
177 controls.

178   **Ethics statement-** Animal research at the United States Army Medical Research Institute of  
179   Infectious Diseases (USAMRIID) was conducted under an animal use protocol approved by the  
180   USAMRIID Institutional Animal Care and Use Committee (IACUC) in compliance with the  
181   Animal Welfare Act, PHS Policy, and other Federal statutes and regulations relating to animals  
182   and experiments involving animals. The facility where this research was conducted is accredited  
183   by the Association for Assessment and Accreditation of Laboratory Animal Care International  
184   (AAALAC) and adheres to principles stated in the Guide for the Care and Use of Laboratory  
185   Animals (National Research Council, 2011). Challenged mice were observed at least daily for  
186   up to 90 days for clinical signs of illness. Early interventions endpoints were used during all  
187   studies, and mice were humanely euthanized when moribund, according to an endpoint score  
188   sheet. Animals were scored on a scale of 0–11: 0–2 = no significant clinical signs (e.g., slightly  
189   ruffled fur); 3–7 = significant clinical symptoms such as subdued behavior, hunched appearance,  
190   absence of grooming, hind limb issues of varying severity and/or pyogranulomatous swelling of  
191   varying severity (increased monitoring was warranted); 8–11 = distress. Those animals receiving  
192   a score of 8–11 were humanely euthanized. However, even with multiple observations per day,  
193   some animals died as a direct result of the infection.

194

195   **Statistical analyses.** Individual daily temperatures and weights were analyzed. The 5 day  
196   lagged, moving average was computed for each individual daily temperature and weight profile  
197   by taking the average of each daily measure and the measures obtained on the 4 preceding days.  
198   The definition is extended to study days preceding the fifth by including all days available. For  
199   example the day 2 lagged average includes days 0, 1 and 2. Our motivation in using these  
200   running averages is to reduce the impact of fluctuations apparent in the individual weight and

201 temperature profiles. The resulting lagged averages were entered into the linear mixed effect  
202 repeated measures model for analysis. Our model utilized a moving average correlation structure  
203 to accommodate the inherent correlation among the lagged averages, successive averages being  
204 computed from sets of observations which are not mutually exclusive. The analysis is  
205 implemented in SAS® Proc Mixed. *P*-values are not adjusted for multiple comparisons.

206 We also considered the correlation coefficient between the body temperature observed on a  
207 particular day, and the change in temperature between that day and the day following, a quantity  
208 hereafter referred to as the lag 1 autocorrelation. We estimated this correlation coefficient  
209 separately for each mouse, with comparison between groups of mice were made by standard  
210 ANOVA procedures for means. Analysis of this correlation was restricted to the first 15 days of  
211 study, before significant animal mortality was observed. Bacterial burdens are depicted as CFU  
212 per gram of tissue. The geometric means of the calculated values are included as horizontal bars.  
213 Spleen weights were analyzed by T-test and geometric means are depicted.

214 **RESULTS**

215 **The impact of intraperitoneal bacterial challenge on body temperature and weight of mice.**

216 Individual temperatures and body weights were recorded daily following IP challenge  
217 with *B. pseudomallei* K96243.. Regarding temperature, the BALB/c mice had a greater body  
218 temperature compared to C57BL/6 mice starting at day 10 and continuing through day 20, but  
219 differences were not statistically significant thereafter (Figure 1A). Notably, BALB/c mice  
220 showed a 0.3°C increase in body temperature when compared to the C57BL/6 mice at these  
221 early time points, an observation which closely mirrors that obtained in mice exposed to  
222 aerosolized bacteria (discussed later). The time by strain interaction was statistically significant

223 ( $P < 0.01$ ), confirming that an overall difference in the temperature profiles between the two  
224 strains existed. The BALB/c and C57BL/6 strains were roughly equivalent in lag1  
225 autocorrelation ( $\rho = -0.71$  vs  $-0.68$ ;  $P = 0.51$ ), suggesting that the two mouse strains had a similar  
226 tendency to return to a normal body temperature following challenge.

227 The mouse weights for BALB/c and C57BL/6 mice were statistically distinguishable  
228 starting at day 5 and at every time point thereafter (Figure 2B). At day 0 the mouse strains  
229 differed by 0.5 grams, an amount which was not statistically significant ( $P = 0.71$ ). The  
230 C57BL/6 mice exhibited a greater average weight gain relative to the BALB/c mice, leading to a  
231 statistically significant time by strain interaction ( $P < 0.01$ ).

232

233 **Bacterial burden observed in mice receiving an intraperitoneal injection of bacteria**  
234 Figure 2 illustrates the recovered CFU/gram of organ or CFU/ml of blood following IP  
235 challenge. Similar median lethal dose equivalents were administered to either the BALB/c  
236 (approximately  $3.0 \times 10^4$  CFO or 0.49 LD<sub>50</sub> equivalents) or C57BL/6 mice (approximately  
237  $9.2 \times 10^5$  CFU or 0.42 LD<sub>50</sub> equivalents); to account for the inherent differences in susceptibility  
238 to infection that have been well documented (REF). The dissemination patterns observed in  
239 either BALB/c or C57BL/6 mice were similar when approximately equal lethal equivalents were  
240 delivered by an intraperitoneal injection (Figure 2). Of interest is the rapid hematogenous spread  
241 of bacteria throughout the animal. Bacteria were identified in all organs and blood in most mice  
242 on day 0 (within approximately 4-6 hours post injection). As demonstrated in previous reports,  
243 spleen weight can be indicative of aspects of both bacterial replication and host immune  
244 response. Thus we compared the weights of the spleens obtained in BALB/c mice and C57BL/6  
245 mice. As shown in Figure S1, in the IP challenge experiment, spleen weights and associated

246 weight increases were statistically indistinguishable, with the exception being day 4 post-  
247 infection. Throughout the course of the study, some of the mice were euthanized in accordance  
248 with early endpoint criteria or succumbed to infection (19 of 80 BALB/c mice and 13 of 80  
249 C57BL/6 mice).

250

251 **Histopathology observed in mice receiving an intraperitoneal injection of bacteria.**

252 Consistent with previous studies involving intraperitoneal infection of *B. pseudomallei* in mice  
253 [46], the most striking lesions attributed to *B. pseudomallei* infection in 9/36 C57BL/6 and 17/36  
254 BALB/c mice were focally extensive areas of pyogranulomatous inflammation in the rear legs,  
255 tail, and spine (Figure 3A). It is unclear why there is an apparent predisposition for the caudal  
256 half of the body (rear legs, tail, and caudal vertebral column); however, it may be related to the  
257 route of lymphatic drainage from the IP challenge site. Human case reports have documented *B.*  
258 *pseudomallei* infection in muscle, bones, and joints [64, 65]. These lesions were first observed at  
259 within a week of each other post exposure in both mouse strains, beginning in BALB/c mice at  
260 day 15 and in C57BL/6 mice at day 22. However, lesions in BALB/c mice were seen with more  
261 frequency and were more severe. Lesions were composed of large aggregates of viable and  
262 degenerate neutrophils and necrotic debris surrounded by low numbers of epithelioid  
263 macrophages. The areas of pyogranulomatous inflammation (Figure 3B) were widespread and  
264 indiscriminant about the tissue types affected, including skeletal muscle, peripheral nerves, bone,  
265 cartilage, adipose tissue, and fibrous connective tissue. This situation made determination of the  
266 temporal pathogenesis of these lesions difficult, however, it is likely that these lesions represent  
267 persistent niduses of inflammation incited by hematogenous or lymphatic bacterial spread earlier  
268 in the course of disease. Other less common but significant sites of pyogranulomatous or

269 suppurative inflammation included the cerebrum, cerebellum, brainstem, liver, and spleen.

270 Lesions in these tissues illustrate the widely dispersed sites of imflammation resulting from  
271 hematogenous spread of *Burkholderia* following intraperitoneal challenge.

272 Inflammation in the liver, which was the earliest detectable lesion in both mouse strains,  
273 began acutely as neutrophilic infiltration of hepatic sinusoids and areas of individual hepatocyte  
274 necrosis (Figure 4A) and was present in 6/6 C57BL/6 mice and 5/6 BALB/c mice between days  
275 0 and 4. This progressed chronically to mixed neutrophilic and histiocytic infiltration, and in a  
276 few mice, to frank suppurative or pyogranulomatous hepatitis in 18/30 C57BL/6 and 13/30  
277 BALB/c mice from day 7 until day 60. Immunohistochemistry demonstrated large amounts of *B.*  
278 *pseudomallei* capsular antigen in these lesions.

279 Neutrophilic inflammation was only seen acutely in the spleen of 1/6 BALB/c mice and  
280 was not seen acutely in C57BL/6 mice, although the identification of these lesions was often  
281 obfuscated by the striking extramedullary hematopoiesis (EMH) seen in these mice. The  
282 development of pyogranulomas and abscesses within the spleen (Figure 4C) was only seen in  
283 4/36 BALB/c mice but was not seen in any of the C57BL/6 mice. While EMH in the splenic red  
284 pulp and sinusoids of the liver are very commonly seen in normal mice in response to a variety  
285 of antigens [66], the degree of EMH in these mice was significantly greater than what is typically  
286 encountered and affected 28/36 C57BL/6 and 19/36 BALB/c mice between days 4 and 60. This  
287 is consistent with a physiologic response to increased tissue demand for leukocytes secondary to  
288 bacterial infections that elicit intense inflammatory reactions. Given the large areas of  
289 pyogranulomatous inflammation seen in these mice, this exuberant EMH is most likely related to  
290 infection with *B. pseudomallei*. For the same reason, many of these mice had significant  
291 myeloid hyperplasia in the bone marrow (Figure 4B), predominantly of the neutrophil lineage. In

292 some cases, the myeloid hyperplasia was so intense that it extended outside of the marrow cavity  
293 of the bones and into adjacent tissues. In the case of the vertebral column, this excessive  
294 hyperplasia occasionally resulted in compression and/or disruption of the spinal cord and  
295 peripheral nerve ganglia. This may partially explain why some mice, despite a lack of significant  
296 pyogranulomatous inflammation in the spine or rear limbs, still exhibited neurologic clinical  
297 signs (i.e. paralysis, ataxia). Interstitial neutrophilic inflammation was seen in the lung of 13/36  
298 C57BL/6 and 17/36 BALB/c mice. The pathogenesis of this inflammation in the lung is not  
299 clear. There is little histologic evidence that the lung is a primary site of *Burkholderia* infection  
300 in these mice by IP challenge, as only 3/36 BALB/c and none of the C57BL/6 mice developed  
301 suppurative or pyogranulomatous pneumonia at any time during the study. The increased  
302 neutrophils could be confined to the capillaries in the interstitium and represent the relative  
303 increase in numbers of circulating neutrophils in the blood as a response to inflammation  
304 elsewhere in the body. Other common sites of neutrophilic inflammation were the nasal sinuses  
305 and the middle ear, however, because of the timing (as early as day 0 post infection) and  
306 sporadic nature of the inflammation seen in the nasal sinuses and middle ears, these could be  
307 background lesions and may be unrelated to the challenge agent.

308

309 **Immunological response observed in mice receiving *B. pseudomallei* K96243 by  
310 intraperitoneal (IP) injection**

311 We wanted to further examine the cellular immune response in spleens of the infected  
312 mice after IP infection. We used the same spleens that were used in the previous analyses (CFU  
313 burdens and weight) to examine the changes in the cellular composition of the spleens after  
314 infection over time, and concurrent cytokine/chemokine expression in serum and spleen extracts  
315 from the same mice. The histopathology description above of tissue/organs noted the large

316 increase in neutrophils after IP infection in BALB/c mice. We used flow-cytometry to better  
317 identify and quantitate the type of cellular infiltrate into the infected spleens after IP infection  
318 (Table S1, and Figure 5). We compared the cellular composition of the infected *B. pseudomallei*  
319 K96243 mouse spleens to the cellular composition of spleens from normal, naïve mice (Table  
320 S1, Figure 5A.). Immediately post-infection (PI) at 0 day (~4-6 h PI), there was a slight increase  
321 in monocytes/macrophages (CD11b+/CD44), and NK cells (CD49b+/CD44) ~2-fold-2.8-fold,  
322 ( $P<0.05$ ), respectively] followed by granulocytes (Ly6G+/CD44) (4.83-fold,  $P\leq0.001$ ). There  
323 was an initial decrease (2 Days PI) in all three cell types before we detected a slight but  
324 significant increase (2.94-fold,  $P\leq0.001$ ; 4.74-fold,  $P\leq0.001$ ; and 4.51-fold,  $P<0.05$ ,  
325 respectively) at day 4 PI. Between 7 to 15 days PI, we saw a significant increase in the  
326 inflammatory granulocytes (35.8-fold,  $P\leq0.001$ ), monocytes/macrophages (8.33-fold,  $P\leq0.001$ ),  
327 and NK cells (7.61-fold,  $P<0.01$ ) in spleens of BALB/c mice where the numbers essentially  
328 leveled off until day 22 PI. After this period, the amount of the three inflammatory cells dropped  
329 close to levels seen at day 0 in the spleens from BALB/c mice that were left in the IP study after  
330 28 days PI. After this period, there was a slow but significant increase in the percentage of  
331 granulocytes ( $P<0.01$ ), monocytes/macrophages ( $P\leq0.001$ ), and NK cells ( $P\leq0.001$ ) until the end  
332 of the study at day 59. During the same period of the study, the three other cell types that we  
333 examined, CD4+ and CD8+ T cells, and B cells, we detected only a slight but modest overall  
334 increase in CD8+ T cells at days 7 and 59 (1.53-fold,  $P\leq0.001$ ; and 1.25-fold,  $P<0.05$ ),  
335 respectively)(Table S1, Figure 5A).

336 In C57BL/6 mice, we detected a slightly different pattern in the increase in the  
337 inflammatory granulocytes, monocytes/macrophages, and NK cells in the early part of the  
338 infection (Table S1, and Figure 5B). Four days PI, we detected a slight increase in the

339 inflammatory cells (17.5-fold,  $P<0.05$ ; 5.78-fold,  $P<0.05$ ; and 7.62-fold,  $P\leq0.001$ , respectively)  
340 before they decreased at day 7 PI. Then at day 15 PI, we saw an increase in the amount of  
341 granulocytes (29.7-fold,  $P\leq0.001$ ) present in the infected spleens, with a further increase detected  
342 at day 22 PI (38.8-fold,  $P<0.01$ ). These mice did not exhibit a leveling off of the amount of  
343 granulocytes as we saw in spleens from BALB/c mice in this same period. We detected a lower  
344 but significant increase in monocytes/macrophages from 8.23-fold ( $P\leq0.001$ ) to 10.4-fold  
345 ( $P\leq0.001$ ) at days 15 and 22 PI, respectively. For the same two days PI, we saw a significant  
346 increase in NK cells of 8.21-fold ( $P\leq0.001$ ) and 5.71-fold ( $P\leq0.001$ ), respectively. Similar to  
347 what we saw in BALB/c spleens at day 28 PI, we detected lower amounts of granulocytes,  
348 monocytes/macrophages, and NK cells (2.62-fold, 2.0-fold, and 3.22-fold, respectively)  
349 compared to that found in the normal, naïve C57BL/6 spleens in surviving mice. We then  
350 detected a significant increase in granulocytes (12.4-fold,  $P\leq0.001$ ), monocytes/macrophages  
351 (16.9-fold,  $P\leq0.001$ ), and NK cells (6.11-fold,  $P\leq0.001$ ) after 59 days PI. Although we saw  
352 some small but significant changes in the number of CD4+ and CD8+ T cells and B cells over  
353 the same period of the study (Table S1 and Figure 5B), they were not as large as seen in the  
354 inflammatory cells. Overall, the pattern of increase in the inflammatory cells (primarily  
355 granulocytes, followed by monocytes/macrophages and NK cells) in spleens from infected  
356 BALB/c mice was similar to that seen in infected spleens from C57BL/6 mice, except for the  
357 early influx in these cells at 4 days PI that we observed in infected spleens from C57BL/6 mice  
358 (Figure 5B), and the leveling off of the peak number of granulocytes between day 15 and 22 PI  
359 in spleens from infected BALB/c mice. In addition, there was a similar substantial decrease in

360 the three inflammatory cells in spleens from both species of mice between 22 to 28 days PI  
361 before we saw a slow increase of these same cells to the end of the study at 59 days PI.

362 We also examined the change in cytokine/chemokine levels in sera and spleen extracts in  
363 both types of mice after IP infection. The amount of 15 out of 20 cytokines/chemokines  
364 (reported as geometric means with geometric standard error of the means) that we detected in  
365 sera from infected BALB/c mice is shown in Table S2. Not all showed significant changes after  
366 exposure to bacteria when compared to naïve, uninfected mice. We saw immediate [0 day (4-6  
367 h)] changes PI in IL-1 $\alpha$  [196.2 (1.16) pg/ml,  $P\leq 0.001$ ], IL-5 [36.7 (1.21) pg/ml,  $P< 0.05$ ], and KC  
368 [2668 (1.15) pg/ml,  $P\leq 0.001$ ]. After 2 days PI, we detected a significant increase in sera of IFN-  
369  $\gamma$  [168.3 (1.11) pg/ml,  $P\leq 0.001$ ], IL-1 $\beta$  [113.9 (1.12) pg/ml,  $P\leq 0.001$ ], FGFb [288 (1.05) pg/ml,  
370  $P< 0.05$ ], IP10 [93.3 (1.16) pg/ml,  $P\leq 0.001$ ], MCP-1 [37.2 (1.16) pg/ml,  $P< 0.05$ ], and MIG [4009  
371 (1.11) pg/ml,  $P\leq 0.001$ ]. These increases can be seen more clearly in Figure S4A, which shows  
372 the fold-changes in the cytokines/chemokines in serum. After 4 days PI, we saw little change in  
373 the levels of the cytokines/chemokines in sera until day 59 PI when we saw small increases in  
374 TNF $\alpha$  (2.39-fold,  $P< 0.05$ ), IL-1 $\beta$  (3.76-fold,  $P< 0.05$ ), IL-2 (2.81-fold,  $P\leq 0.001$ ), and IL-10  
375 (2.88-fold,  $P\leq 0.001$ ).

376 In sera of C57BL/6 mice (Table S2) we saw immediate (0 day) increases over naïve  
377 controls of IL-1 $\alpha$  [235.3(1.15) pg/ml,  $P\leq 0.001$ ], IL-5 [96.5 (1.19) pg/ml,  $P< 0.01$ ], KC [3848  
378 (1.08) pg/ml,  $P\leq 0.001$ ], MCP-1 [247.5 (1.29) pg/ml,  $P\leq 0.001$ ], and MIG [439.7 (1.33) pg/ml,  
379  $P\leq 0.001$ ] (Table S2). After day 2 PI we detected significant increases in IFN- $\gamma$  [97.6 (1.11)  
380 pg/ml,  $P< 0.01$ ], IL-1 $\alpha$  [85.3 (1.33) pg/ml,  $P< 0.05$ ], IL-5 [37.2 (1.20) pg/ml,  $P< 0.05$ ], FGFb  
381 [516.9 (1.05) pg/ml,  $P< 0.05$ ], IP-10 [78.0 (1.43) pg/ml,  $P< 0.05$ ], KC [424.4 (1.68) pg/ml,

382  $P<0.05]$ , MCP-1 [118.0 (1.54) pg/ml,  $P<0.05$ ], and MIG [2107 (1.13) pg/ml,  $P\leq0.001$ ]. At 4  
383 days PI we saw only increases in FGFb [464.2 (1.14) pg/ml,  $P<0.05$ ] and MIG [491.8 (1.27)  
384 pg/ml,  $P\leq0.001$ ]. The early fold-changes in sera from C57BL/6 mice can be seen in Figure S4B  
385 when compared to those in sera from BALB/c mice, except for the fold-changes in the level of  
386 MIG because the early responses by this chemokine (0, 2, or 4 days PI) were so high compared  
387 to all the other cytokines/chemokines in serum from C57BL/6 mice (see Table S2). For MIG at  
388 0, 2, and 4 days PI, there were increases of 54.3-fold ( $P\leq0.001$ ), 231-fold ( $P\leq0.001$ ), and 54.0-  
389 fold ( $P\leq0.001$ ), respectively. For the chemokine KC at 0 days PI we saw there was an  
390 immediate 52.7-fold increase ( $P\leq0.001$ ), which was high compared to the other  
391 cytokines/chemokines except for MIG (Figure 2B). Between days 7 to 28 PI levels of IFN- $\gamma$   
392 ( $P<0.05$ ), IL-1 $\alpha$  ( $P<0.01$ ), and MIG ( $P\leq0.001$ ) were significantly elevated compared to most of  
393 the other cytokines/chemokines. Finally, by day 59 PI, we detected significant levels of TNF- $\alpha$   
394 [44.8 (1.11) pg/ml ( $P<0.01$ )], IL-2 [19.0 (1.03) pg/ml,  $P\leq0.001$ ], IL-10 [147.9 (1.07) pg/ml,  
395  $P\leq0.001$ ], KC [225.4 (1.38) pg/ml,  $P<0.05$ ], and MIG [77.3 (1.15) pg/ml,  $P\leq0.001$ ].  
396 Generally, at the early time points, we saw a few more elevated cytokines/chemokines in the sera  
397 of BALB/c mice PI than in sera of C57BL/6, but there were slightly higher levels of  
398 inflammatory cytokines/chemokines after the initial peak seen PI in sera from C58BL/6 mice.

399 We also examined the amount of cytokines/chemokines in spleen extracts PI from the  
400 same set of mice that we analyzed above (Table S3, Figure 6). In spleen extracts from BALB/c  
401 mice at 0 day PI, we detected a significant increase in levels of a majority of the  
402 cytokines/chemokines we measured: IL-1 $\alpha$  [356.8 (1.09) pg/ml,  $P\leq0.001$ ], IL-1 $\beta$  [256.8 (1.09)  
403 pg/ml,  $P\leq0.001$ ], IL-12 [63.8 (1.03) pg/ml,  $P\leq0.001$ ], FGFb [2908 (1.13) pg/ml,  $P\leq0.001$ ], IP-10

404 [103.8 (1.08) pg/ml,  $P \leq 0.001$ ], KC [1237 (1.21) pg/ml,  $P < 0.01$ ] MCP-1 [41.2 (1.15) pg/ml,  
405  $P < 0.01$ ], MIG [1122 (1.10) pg/ml,  $P \leq 0.001$ ], MIP-1 $\alpha$  [108.9 (1.06) pg/ml,  $P \leq 0.001$ ], and VEGF  
406 [58.8 (1.06) pg/ml,  $P \leq 0.001$ ]. At day 2 PI we detected a significant increase in the same  
407 cytokines/chemokines as 0 day PI with the addition of IFN- $\gamma$  [171.4 (1.16) pg/ml,  $P \leq 0.001$ ],  
408 TNF- $\alpha$  [33.2 (1.06) pg/ml,  $P < 0.001$ ], IL-5 [42.3 (1.14) pg/ml,  $P < 0.05$ ], IL-6 [48.1 (1.08) pg/ml,  
409  $P \leq 0.001$ ], and IL-10 [35.2 (1.07) pg/ml,  $P \leq 0.001$ ]. At days 4 and 7 PI, we saw fewer increases  
410 in the cytokines/chemokines levels, but at day 15 PI, we saw the greatest increase in the amount  
411 and number of cytokines/chemokines expressed (Table S3, Figure6A). The peak of activity  
412 began decreasing after day 15 and further decreased by day 22 PI before we detected a slight but  
413 significant increase in the amount and number of cytokines/chemokines expressed in spleen  
414 extracts on day 59 PI from BALB/c mice.

415 When we examined the amount of cytokines/chemokines present in spleen extracts from  
416 C57BL/6 mice we saw at least three differences over the course of the study compared to that in  
417 BALB/c spleen extracts (Table S3, Figure 6B). First, in most cases there was an greater  
418 immediate increase in amounts of the cytokines/chemokines that we examined (compared to that  
419 found in spleen extracts from naïve mice) in spleen extracts from C57BL/6 that we detected on  
420 day 0 PI, that were higher than found in spleen extracts from BALB/c mice at day 0 PI. Most  
421 notable were IP-10 [1221 (1.25) pg/ml,  $P \leq 0.001$ ], IL-1 $\beta$  [672.7 (1.10) pg/ml,  $P \leq 0.001$ ], IL-1 $\alpha$   
422 [1237 (1.25) pg/ml,  $P \leq 0.001$ ], MIG [3653 (1.21) pg/ml,  $P \leq 0.001$ ], KC [3320 (1.12) pg/ml,  
423  $P \leq 0.001$ ], MIP-1 $\alpha$  [382.4 (1.25) pg/ml,  $P \leq 0.001$ ], and IFN- $\gamma$  [100.3 (1.35) pg/ml,  $P < 0.01$ ].  
424 Second, we did not see a peak in the change in the level of the cytokines/chemokines that we just  
425 mentioned on day 2 PI, as we saw in spleen extracts from BALB/c mice, but there was a modest

426 peak at day 7 PI (see Figure 6B). The third difference was that the peak change in IL-1 $\beta$  [846.5  
427 (1.67) pg/ml,  $P<0.01$ ] levels, which is an inflammatory cytokine, occurred at day 22 PI in spleen  
428 extracts from C57BL/6 infected mice, rather than at day 15 PI in spleen extracts from infected  
429 BALB/c mice. However, there was a distinct decrease in the change in the levels of  
430 cytokines/chemokines at day 28 PI seen in spleen extracts from both strains of mice. We also  
431 detected a similar increase in many of the cytokines/chemokines on day 59 PI in spleen extracts  
432 from both mice (Table S3). Hence, we saw an increase in the inflammatory cytokines IL-1 $\alpha$  and  
433 IL-1 $\beta$  and also MIG was increased in the early part of the infection in extracts from both strains  
434 of mice. As we saw in the change in the influx of inflammatory cells in the spleen (Figure 5),  
435 there appeared to be a distinct change in cytokines/chemokines levels between 22 and 28 days PI  
436 in spleen extracts that may suggest that there was a transition from an early or acute phase of  
437 infection to a late or chronic phase of infection (Figure 6AB).

438

439 **Mice Exposed to Aerosolized *Burkholderia pseudomallei* K96243**

440 **The impacts of exposure to aerosolized *B. pseudomallei* on body temperature and weights  
441 of mice.**

442 Individual weights and temperatures were recorded daily. When mice were exposed to  
443 aerosolized bacteria, the difference in temperature between BALB/c and C57BL/6 mice was  
444 appreciable. Statistically significant differences between the BALB/c and C57BL/6 mouse body  
445 temperatures were observed for the average of day 1 to day 5 ( $P<0.01$ ), with the BALB/c strain  
446 having a temperature 0.33° C greater than that of the C57BL/6 mice (Figure 7A), however  
447 differences between the BALB/c and C57BL/6 strains were not statistically significant at later  
448 time points. The strain by time interaction was statistically significant ( $P<0.01$ ), which is  
449 attributable to the separation at early time points diminishing as the study continued. Consistent  
450 with the observed longitudinal temperature trends, we found that the C57BL/6 mice showed a

451 significantly more negative lag 1 auto correlation ( $\rho = -0.71$  vs  $-0.38$ ;  $P < 0.01$ ) over the first 15  
452 days of study, indicating that, the BALB/c strain maintained greater body temperature in the  
453 short term and the C57BL/6 strain had a greater propensity to return to normal body temperature.  
454 Statistically significant differences between the mouse strains in terms of body weight were  
455 observed by day 5 and at all subsequent time points (Figure 7B). The strain by time interaction  
456 was statistically significant ( $P < 0.01$ ). Absolute differences in mean body weight between strains  
457 continued to increase with time, reaching 4.5 grams by day 15.

458

459 **Bacterial burden observed in mice exposed to aerosolized *Burkholderia pseudomallei***

460 Unlike the dissemination patterns observed in mice exposed to *B. pseudomallei* via IP  
461 injection, the mice that were exposed to aerosolized *B. pseudomallei* had fairly distinct  
462 dissemination patterns that differed between BALB/c and C57BL/6 mice. Some of these  
463 differences are likely partially related to the different LD<sub>50</sub> equivalents delivered via each route  
464 of exposure. Both strains of mice received low doses of aerosolized bacteria; the BALB/c were  
465 exposed to approximately 5 CFU (0.5 LD<sub>50</sub> equivalents) and the C57BL/6 mice were exposed to  
466 approximately 18 CFU (0.02LD<sub>50</sub> equivalents). The BALB/c were all euthanized or had  
467 succumbed to infection by day 28, whereas the C57BL/6 mice survived longer and serial  
468 samples were collected at day 91. The dissemination patterns for the BALB/c mice were similar  
469 in all organs sampled (Figure 8). While variation existed between animals, the average bacterial  
470 burden seemed to peak at day 7 post-exposure and then continue to drop through day 22. The  
471 bacterial burden in the lungs was the most pronounced (Figure 8B), followed by the spleens  
472 (Figure 8A) and then finally liver samples (Figure 8C). The liver samples indicated that bacterial  
473 burden in this organ was approximately 10% of what can be observed in the spleens of the same

474 mice. Similar observations have been reported by Massey et al. [51]. Some of the BALB/c mice  
475 became bacteremic between day 2 and day 4 (Figure 8D).

476 The dissemination patterns of the C57BL/6 mice were markedly different compared to  
477 BALB/c (Figure 8). At time points examined, none of the mice showed signs of bacteremia  
478 (limit of detection 100 CFU/1 ml of blood) (Figure 8D). The C57BL/6 mice were seemingly  
479 better able to control the ensuing infection, and the bacterial burdens did not reach the magnitude  
480 observed in BALB/c mice and appeared to peak 2-4 days post-exposure to aerosolized bacteria.  
481 The dissemination data collected from the spleens (Figure 8A) and livers (Figure 8C) of the  
482 C57BL/6 mice suggested a predisposition towards a potentially chronic infection as has been  
483 previously reported [30, 38]. The spleen samples (Figure 8A), for example, were negative (limit  
484 of detection 10 CFU/1 ml of spleen homogenate) for *B. pseudomallei* after day 7 post-exposure,  
485 but on day 91 post-exposure 2 out of 12 surviving mice were culture positive for *B.*  
486 *pseudomallei*. These data indicated that at least a subset of C57BL/6 mice retained a low level of  
487 bacteria 91 days post exposure to a low dose of aerosolized bacteria. Twelve mice were  
488 euthanized and sampled on day 91 of which 2 of 12 mice were culture positive in the spleen  
489 sample, 3 of 12 mice were culture positive in the liver sample, and 6 of 12 mice maintained low  
490 levels of infection in lung tissue. Spleen weight was also analyzed, and significant differences  
491 were noted on days 15 and 22 post-infection ( $P = 0.03$  and  $0.0007$ , respectively), indicating that  
492 the BALB/c spleens were larger which in this experiment seemed to be associated with bacterial  
493 replication (Figure S2). Throughout the course of the study some of the mice were euthanized in  
494 accordance with early endpoint criteria or succumbed to the infection (30 of 80 BALB/c mice  
495 and 1 of 80 C57BL/6 mice).

496

497 **Histopathology observed in mice exposed to aerosolized bacteria.**

498 In contrast to the intraperitoneal challenge model, mice in the aerosol challenge model  
499 most consistently developed acute lesions in the nasal cavity and lung, and chronic lesions in the  
500 lung and spleen. Acute lesions in the nasal cavity were noted in 13/28 C57BL/6 mice as early as  
501 day 2 and in 9/29 BALB/c mice as early as day 4 and were characterized by intense neutrophilic  
502 inflammation which filled nasal sinuses (Figure 9A) and occasionally caused necrosis of the  
503 respiratory/olfactory epithelium and underlying subepithelial connective tissue. These lesions  
504 were generally confined to the posterior segment of the nasal cavity and often directly abutted  
505 the cribriform plate. In 2 of the BALB/c mice, the inflammation continued along olfactory nerve  
506 tracts, penetrating the cribriform plate and involving the meninges and neuropil of the olfactory  
507 bulbs and rostral cerebrum (Figure 9B). This was accompanied by a marked to severe  
508 neutrophilic exudate in the middle ear (Figure 9C), with necrosis of the respiratory epithelium  
509 lining the middle ear in 8/28 C57BL/6 mice and 9/29 BALB/c mice; it is surmised that in these  
510 cases the inflammation in the middle ear originated in the nasal cavity and extended along the  
511 eustachian tubes into the middle ear. This phase of infection appears to have remained active  
512 beyond the acute post-challenge timeframe in at least some of the mice, as evidenced by the  
513 persistence of neutrophilic inflammation and the lack of a progression to a more chronic  
514 inflammatory cell population in animals as late as 91 days post infection. This nidus of infection  
515 and inflammation may be a potential source of dissemination or reinfection for these mice at  
516 later time points.

517 16/28 C57BL/6 mice and 24/29 BALB/c mice had lung lesions attributed to *Burkholderia*  
518 infection. Not surprisingly, lesions in the lungs of the aerosolized mice from both strains

519 occurred much more acutely than in mice challenged via the intraperitoneal route. The earliest  
520 lesions consisted of multiple randomly arranged neutrophilic/suppurative foci with variable  
521 amounts of pneumocyte and septal necrosis. These foci were often associated with small and  
522 medium pulmonary vessels in an apparent embolic pattern (Figure 10A and B).; this pattern of  
523 inflammation in the lung is usually associated with infectious agents that arrive via a  
524 hematogenous (embolic) route. This is unexpected, as one would expect the aerosolized  
525 *Burkholderia* to arrive as inhaled particles and establish lesions more consistent  
526 with bronchopneumonia. There are two possible explanations for this pattern of inflammation.  
527 The first is that following exposure to aerosolized *B. pseudomallei*; the bacteria quickly enter the  
528 circulation via alveolar septa and establish a bacteremia, with subsequent embolic spread to  
529 multiple sites throughout the lung and more distant organs. The second is that following aerosol  
530 exposure, the bacteria are quickly phagocytized by resident alveolar macrophages, which then  
531 traffic the bacteria to these perivascular sites where they incite an intense neutrophilic reaction.  
532 Given the short amount of time in which these lesions are established, the latter seems more  
533 plausible, particularly since *B. pseudomallei* is hypothesized to evade the immune response by its  
534 intrahistiocytic localization [67]. In the BALB/c mice, by day 7 the inflammation progressed to  
535 histiocytic or pyogranulomatous inflammation (Figure 10C and D), with higher numbers of  
536 histiocytes and epithelioid macrophages. In some cases, these areas of granulomatous  
537 inflammation developed into well-organized pyogranulomas, with a core of necrotic debris and  
538 viable and degenerate neutrophils surrounded by epithelioid macrophages, further bounded by a  
539 fibrous capsule and numerous lymphocytes and neutrophils. Occasionally, there were  
540 multinucleated giant cell macrophages admixed with the epithelioid macrophages. Adjacent  
541 alveolar septa were often expanded by neutrophils and histiocytes, and alveolar, bronchiolar, and

542 bronchial lumens were often expanded by a profound neutrophilic exudate. These lesions are  
543 similar to those described in melioidosis in man [60]. Severe lung lesions in C57BL/6 mice were  
544 far less common, typically consisting only of interstitial inflammation and only rarely developing  
545 into well-organized pyogranulomas. By day 22 and beyond, significant lesions in the lung were  
546 completely lacking in C57BL/6 mice. This could be attributed to the purposefully low dose of  
547 bacteria used in this study, and it is possible that such a resolution of lung lesions would  
548 eventually have occurred in BALB/c mice; however we were unable to evaluate this as none of  
549 the mice of this strain survived beyond day 28.

550 In BALB/c mice, the spleen was another common location for development of acute  
551 suppurative and chronic granulomatous inflammatory lesions, affecting 12/29 mice. Early lesions  
552 starting on day 2 consisted of small foci of neutrophilic/suppurative inflammation with necrosis  
553 of adjacent red pulp elements and occasional fibrin thrombi. By day 15, inflammation progressed  
554 to histiocytic or pyogranulomatous inflammation, often with organized pyogranuloma formation  
555 similar to that seen in the lung (Figure 11). No such inflammatory lesions were noted in any of  
556 the C57BL/6 mice examined in this study.

557 In both strains of mice, liver involvement was not nearly as extensive as observed in the  
558 mice exposed via the intraperitoneal route. In fact, none of the aerosol exposed mice (BALB/c or  
559 C57BL/6) developed chronic pyogranulomatous lesions in the liver. Liver lesions were limited to  
560 small foci of neutrophilic inflammation with or without hepatocyte necrosis were scattered  
561 throughout the liver. Based on immunohistochemistry of the mice, it is likely that at least a  
562 portion of these lesions can be attributed to *Burkholderia*; however, the remainder of these  
563 lesions likely represent inflammation and necrosis secondary to other enterohepatic bacteria,  
564 commonly seen in mice.

565        None of the aerosol exposed mice from either strain developed debilitating/paralytic  
566    lesions in the spine and rear legs as was seen frequently with IP exposure; however three  
567    BALB/c mice did develop pyogranulomas in the tail. These certainly represent lesions that  
568    developed from secondary embolic spread of the *Burkholderia*. One BALB/c mouse developed  
569    pyogranulomas in the pancreas, also likely a sequel to embolic spread of the bacteria. All mice  
570    from both strains developed hyperplasia of the myeloid component of the bone marrow, as well  
571    as variable amounts of extramedullary hematopoiesis in the liver and spleen, representing  
572    increased tissue demand for leukocytes; however, these lesions were not nearly as intense as  
573    those seen in mice exposed via the IP route.

574    **Immunological response associate with mice exposed to aerosolized bacteria.**

575    We then examined the levels of cytokines/chemokines present in the sera of aerosol exposed  
576    BALB/c and C57BL/6 mice (Table S5). In Figure S4, we showed the changes in the  
577    cytokines/chemokines in sera for this study up to 22 days PI for C57BL/6 because there were no  
578    BALB/c survivors after that time for comparison, and there were not many significant changes in  
579    the cytokine/chemokine levels in sera from C57BL/6 mice after 22 days PI. The amount of  
580    cytokines/chemokines in sera after 28, 59, and 90 days after exposure to bacteria in C57BL/6  
581    mice can be seen in Table S5. Immediately after the mice were exposed to *B. pseudomallei*  
582    K96243 (0 days) we detected a significant rise in IFN- $\gamma$  [68.6 (1.06) pg/ml,  $P<0.05$ ], IL-4 [134.4  
583    (1.14) pg/ml,  $P<0.05$ ], IL-10 [85.4 (1.13) pg/ml,  $P<0.01$ ], FGFb [507.2 (1.03) pg/ml,  $P<0.05$ ]  
584    and MIG [133.6 (1.22) pg/ml,  $P<0.01$ ] in sera from C57BL/6mice (Table S5). After 2 days PI,  
585    we saw a significant increase in more cytokines/chemokines in sera from both mouse strains  
586    (Table S5, Figure 12). Overall, from 4 days to 22 days PI, we detected an increase in more  
587    cytokines/chemokines in sera from BALB/c mice than from C57BL/c (Table S5, Figure 8).

588 Those would include IFN- $\gamma$ , IL-1 $\alpha$ , IL-1 $\beta$ , IL-6, IP-10, and MIG. We did not show the fold-  
589 change of the chemokine MIG in sera from C57BL/6 in Figure 8 because it was very high at 2  
590 days PI (235-fold), and it would make it difficult to see the changes in the amounts of the other  
591 cytokines/chemokines in the same figure. From day 28 to 90 days PI, we saw significant levels  
592 of IL-2 and MIG in sera from C57BL/6 mice although we detected the presence of many other  
593 cytokines/chemokines (Table S5).

594 We also examined the cytokines/chemokines present in the spleen extracts from the  
595 BALB/c and C57BL/6 mice that were exposed to *B. pseudomallei* K96243 by aerosol (Table S6,  
596 and Figure 13). We saw many more immediate (0 day PI) increases in cytokines/chemokines  
597 levels in the spleen extract of both strains of mice than we saw in sera (Table S6). We saw a  
598 significant increase in the expression of many of the cytokines/chemokines after 2 days PI in  
599 both mouse strains, but the fold-change was more apparent in spleen extracts from BALB/c mice  
600 (Figure 13). MIG levels again showed the largest and rapid changes early after infection in  
601 spleen extracts from both mice. In BALB/c mice we detected a rapid rise up to 2 days PI [3494  
602 (1.36) pg/ml,  $P \leq 0.001$ ] before it decreased at day 4 PI [1813 (1.19) pg/ml,  $P \leq 0.001$ ], and MIG  
603 levels peaked at 7 days PI [4313 (1.16) pg/ml,  $P \leq 0.001$ ] before there was a gradual decrease to  
604 22 days PI [1905 (1.50) pg/ml,  $P < 0.01$ ] after which all BALB/c mice perished. We also detected  
605 a large increase in the inflammatory cytokines IL-1 $\alpha$  and IL-1 $\beta$  that peaked at 15 PI [1963 (3.28)  
606 pg/ml and 1296 (1.45) pg/ml ( $P \leq 0.001$ ), respectively] before gradually decreasing to day 22 PI  
607 (Table S6 and Figure 13). Although we saw increases in these two inflammatory cytokines in  
608 spleen extracts from C57BL/6 mice, they did not reach levels seen in BALB/c mice. One  
609 cytokine that we found high levels present in spleen extracts from both mice was IL-4, which is a

610 T-helper type 2 (Th2) cytokine, although more was present in C57BL/c spleen extracts where  
611 levels peaked at 28 days PI [522.2 (1.07) pg/ml,  $P \leq 0.001$ ] before it decreased to basal levels at  
612 59 and 90 days PI (Table S6). We also saw high levels of IFN- $\gamma$  in spleen extracts from BALB/c  
613 mice at 2 and 7-22 days PI, but at 2 and 15 – 28 days PI in extracts from C57BL/6. IL-2 had the  
614 second highest fold-change in spleen extracts from C57BL/c mice that peaked at 15 days PI.  
615 Both IFN- $\gamma$  and IL-2 are considered Th1-type cytokines. Overall, we detected more  
616 cytokines/chemokines in spleen extracts from BALB/c mice than from C57BL/6 mice by 15 day  
617 PI and generally at higher levels (Table S6, Figure 9). Before the remaining BALB/c mice  
618 expired at 22 days PI there were high levels of IL-1 $\alpha$ , IL-1 $\beta$ , IL-2, IL-4, IL-12, IFN- $\gamma$ , MIG, and  
619 TNF- $\alpha$  that were present in their spleen extracts. In addition, there were at least two general  
620 peaks of cytokines/chemokines activity in spleen extracts from both mice that occurred at 2 days  
621 and 15 days PI. Finally, we saw a mixed Th1- and Th2-like cytokine production in spleen  
622 extracts from both BALB/c and C57BL/6 aerosol infected mice.

623 We also examined the cellular immune response in both BALB/c and C57BL/6 mice that  
624 were exposed to *B. pseudomallei* K96243 by aerosol. We examined cellular changes that  
625 occurred in spleens from aerosol infected mice and cytokines/chemokines present in serum and  
626 expressed in spleen extracts from the same mice. Table S4 and Figure 14 show the results of the  
627 analysis of the changes in cell composition of the spleens from the infected mice. However,  
628 unlike the IP exposure study described previously, no *B. pseudomallei* K96243 aerosol exposed  
629 BALB/c mice survived after 22 days PI. As we saw in the IP challenge study, granulocytes  
630 (Ly6G+/CD44) were the predominant host cell that accumulated in the mouse spleen after  
631 aerosol exposure up to 22 days PI. At 2 days PI we saw a small but significant transient increase  
632 in the granulocyte cell population that decreased on day 4 PI, and then they increased to a

633 maximum on day 15 PI in spleens from both BALB/c ( $P<0.01$ ) and C57BL/6 ( $P<0.05$ ) exposed  
634 mice, although we detected more granulocytes in the former mice [25.8 (5.21) %] than in the  
635 latter mice [10.0 (2.91) %](Table S4 and Figure 14). After this peak period, the number of  
636 granulocytes decreased in spleens from both mouse strains [15.7 (2.58) % and 2.00 (0.34) %],  
637 respectively, at day 22 PI. We also saw a significant increase in the other two types of  
638 inflammatory cells [monocytes/macrophages (CD11b+/CD14) and NK cells (CD49b/CD69)] in  
639 spleens at the same time in both strains of mice, except they did not reach as high a percentage as  
640 the granulocytes (Table S4 and Figure 14). In spleens from C57BL/6 mice at day 15 PI the  
641 number of NK cells rose to 25.5 (1.62) % ( $P\leq0.001$ ) and in BALB/c we saw an increase in  
642 numbers up to 29.7 (1.37) % ( $P\leq0.001$ ). In Figure 7 the fold changes in the number of  
643 monocytes/macrophages and NK cells were lower than that of the granulocytes because the  
644 initial amount of granulocytes in naïve mice were much lower than that of  
645 monocytes/macrophages and NK cells. We detected very little numbers of granulocytes in naïve  
646 mouse spleens (~1.0% in BALB/c and ~0.58% in C57BL/6) compared to the other inflammatory  
647 cells (see Table S4).

648

649 **The presence of multi-nucleated giant cells (MNGCs) is appreciable in mice exposed to  
650 aerosolized bacteria.**

651 MNGCs were not readily observed in the animals challenged by the intraperitoneal route  
652 in this study. This was in contrast to data presented by Chirakul et al. that indicated that MNGCs  
653 were present in the spleens of BALB/c mice challenged intraperitoneally with *B. pseudomallei*  
654 K96243 [58]. Previous reports of multinucleated giant cell macrophages in chronic melioidosis

655 suggest that these cells may be seen in a second wave of inflammation, perhaps from a  
656 recrudescence of *Burkholderia* infection [58, 60]. It is possible that if mice were sacrificed at  
657 later time points (>60 days post infection), such lesions might be more prominent in the mice  
658 challenged via the IP route. We did observe MNGCs in the lungs of 3/28 C57BL/6 mice and  
659 both the lungs and spleens of 9/29 BALB/c mice challenged with aerosolized bacteria (Figure  
660 15).

## 661 **DISCUSSION**

662 We have systematically characterized the disease progression after introduction of *B.*  
663 *pseudomallei* K96243 into either BALB/c or C57BL/6 mice. The mice were challenged with  
664 these bacteria by either IP injection or by exposure to aerosolized bacteria. Our data support  
665 other work [27, 30, 35-44, 46-50] suggesting that each strain of mouse has strengths and  
666 weaknesses when studying the pathogenesis of *B. pseudomallei* and as models for the human  
667 responses to infection. To our knowledge, this is one of the most comprehensive reports of these  
668 murine disease models. While the ultimate goal of biodefense research is to elucidate therapies  
669 and vaccines to treat inhalational forms of these diseases, it is important to also have a well-  
670 characterized alternate model due to logistic and financial constraints when dealing with aerosol  
671 exposure studies. We chose to pursue the IP model as an alternate for several reasons; including,  
672 ease and reproducibility of exposure methodology, and the fact that many of the clinical signs may  
673 be potentially mimicking some of those observed in human cases of melioidosis [40, 50]. As  
674 illustrated in Figure 2, the dissemination patterns after IP injection of the bacteria were fairly  
675 similar between BALB/c and C57BL/6 mice in spite of the disparity between the numbers of  
676 bacteria administered to achieve comparable LD<sub>50</sub> equivalents in each mouse strain. While the  
677 amount of bacteria used to challenge the C57BL/6 mice was approximately 30 times greater than

678 the challenge dose used for BALB/c mice, the resulting levels of bacteremia were similar. This  
679 clearly demonstrates that the C57BL/6 immune response is better suited to combat this infection.  
680 Interestingly, the bacteria can disseminate to the lungs very early after injection, but by day 4  
681 post-infection the majority of lungs were free of bacteria.

682 These data collected from mice exposed to aerosolized bacteria demonstrated a similar  
683 trend. We attempted to deliver comparable LD<sub>50</sub> equivalents by exposing mice to aerosolized  
684 bacteria. However, due to the difficulty associated with reproducibly delivering very low doses  
685 of bacteria (i.e. >20 CFU), the BALB/c mice received approximately 0.5 LD<sub>50</sub> equivalent  
686 whereas the C57BL/6 mice received approximately 0.02 LD<sub>50</sub> equivalents. This difference in  
687 achieved delivered LD<sub>50</sub> equivalents may account for some of the differences we observed.  
688 When mice were exposed to aerosolized bacteria, there was an increase in bacterial burdens in  
689 either strain of mouse; however the extent and duration of detectable bacteria in tissues were  
690 appreciably greater and longer in BALB/c as compared to C57BL/6 mice. C57BL/6 mice were  
691 never observed to be bacteremic, whereas BALB/c mice were demonstrably bacteremic from day  
692 4 through day 15. In the case of lung bacterial burden, C57BL/6 mice experienced bacterial  
693 replication through day 4, followed by a decline, and then plateau of bacterial growth. The  
694 BALB/c mice exhibited a greater and longer lived bacterial replication cycle in the lungs, and  
695 unfortunately, there were no survivors beyond day 28 to analyze and compare with the C57BL/6  
696 mice. Of note were the results obtained from the spleen homogenates. The BALB/c mice  
697 exposed to aerosolized bacteria had rapid and robust dissemination to and replication within the  
698 spleen, peaking at approximately day 7 but remained significant throughout the entire study (day  
699 22 for BALB/c mice). The C57BL/6 mice exposed to aerosolized bacteria, however,  
700 demonstrated rapid dissemination, but replication peaked at day 2 and then bacterial growth was

701 not observed in the spleen tissues after day 7. Interestingly, however, bacteria were detected in  
702 samples collected on day 91 post exposure to aerosolized bacteria, lending further support to the  
703 concept that C57BL/6 mice may represent an appropriate chronic disease model. In our studies,  
704 particles containing aerosolized bacteria were approximately 1-3  $\mu\text{m}$  in diameter. There is  
705 evidence that different particle sizes can lead to different disease progression. Thomas et al.  
706 demonstrated that *B. pseudomallei* delivered in larger droplets (i.e. 12  $\mu\text{m}$  in diameter) resulted  
707 in a greater involvement in the nasal tissues, olfactory mucosa, olfactory nerve, olfactory bulb  
708 and brain tissue [68]. Similar results have been demonstrated when mice were exposed to *B.*  
709 *pseudomallei* via intranasal instillation which inherently delivers large droplets of bacteria [69].  
710 This was in contrast to pathology observed when mice were exposed to 1  $\mu\text{m}$  sized particles of  
711 aerosolized bacteria which displayed more significant lung pathology, as well as involvement of  
712 the mediastinal lymph nodes [68]. The impact of particle size on *B. pseudomallei* pathogenesis  
713 has also been established in intratracheal instillation of *B. pseudomallei* when separate  
714 laboratories utilized similar techniques but their respective equipment yielded differing particle  
715 sizes [70, 71].

716 Interestingly, we observed MNGCs in both the spleen and lungs of BALB/c and  
717 in lungs of C57BL/6 mice after exposure to aerosolized bacteria (Figure 15). We were unable to  
718 identify MNGCs in either mouse strain following the introduction of bacteria via IP injection.  
719 Again, these differences underscore the importance of bacterial strain, delivered dose, and  
720 delivery route. There have been reports suggesting a correlation of MNGC formation with other  
721 virulence attributes [72], and our previous work has proposed an inverse correlation between  
722 MNGC formation in vitro with virulence in mouse models of infection [40]. Chirakul et al.

723 reported differences in the inflammatory response observed in BALB/c mice compared to  
724 C57BL/6 mice when infected with either wild-type K96243 or a mutant strain with altered type  
725 III secretion system expression [58]. These authors readily found MNGC formation in BALB/c  
726 mice infected with either strain of *B. pseudomallei* and demonstrated that bacterial genes (i.e.  
727 *bprD*) may be expressed differentially in BALB/c mice compared to C57BL/6 mice [58]. Why  
728 the MNGCs were encountered in the aerosol challenged mice, and not the intraperitoneally  
729 exposed mice is unclear; perhaps initial passage through alveolar macrophages early in the  
730 disease process enhances the ability of the bacterial to induce MNGC formation or perhaps the  
731 IP exposure in some way reduces this ability. Further studies specifically examining MNGC  
732 prevalence in vivo and potential significance of such cellular morphologies are warranted.

733

734 Although histochemical analysis of infected tissue identified the infiltrating granulocytes  
735 were predominately neutrophils, we also used flow cytometry to identify that the major  
736 infiltrating cells into the infected spleens were Ly6G+, infiltrating monocytes/macrophages and  
737 NK cells. Although there were similarities in the temporal pattern and the amount of infiltrating  
738 inflammatory cells into the spleens in these two mouse strains after IP infection, there were some  
739 differences in the overall immune response and susceptibility of BALB/c mice to *B.*  
740 *pseudomallei* K96243 infection compared to the more resistant C57BL/6 mice. In the cellular  
741 innate immune response in the IP challenge study, there was a transitory increase in Ly6G+  
742 granulocytes, monocytes/macrophages, and NK cells between 2-7 days after infection in  
743 C57BL/6 mice that was not evident in BALB/c mice that were infected by the same route. In the  
744 aerosol challenge study, there was a very minor but noticeable transitory increase in granulocytes

745 in both mouse strains but not the other inflammatory cells two days after infection. It is not clear  
746 at this time if the early transitory peak of granulocytes reflects an initial response to CFU  
747 appearing in the spleen or an initial infiltration of granulocytes that contain *B. pseudomallei* that  
748 appear in the spleen within 1-2 days after infection, although this early association with Ly6G+  
749 neutrophils was also previously observed in lungs of BALB/c mice [73]. Although we cannot  
750 discount the influence of the number of CFU used between the IP and aerosol challenge study,  
751 one of the major differences between the two routes of infection was the larger number of  
752 Ly6G+ granulocytes that infiltrated the spleens of the two mouse strains by the IP route over that  
753 by the aerosol route of infection. This occurred even though eventually the CFU in the spleen,  
754 lung, and liver reached similar levels in the aerosol challenged mice when compared with the IP  
755 challenged mice which occurred almost immediately. At the same time, the number of the other  
756 innate immune inflammatory cells (monocytes/macrophages and NK cells) did not appear to  
757 appreciably change over the same period. There have been a number of reports noting the  
758 importance of neutrophils in the response to or required for clearance of *B. pseudomallei* in  
759 BALB/c or C57BL/6 mice [41, 50, 73-75]. The peak level of Ly6G+ granulocytes present in  
760 spleens of both BALB/c and C57BL/6 mice that were challenged by the IP route was between 15  
761 to 22 days PI with the maximum at 22 days PI (36.6- and 39-fold increase, respectively), which  
762 was also similar with the peak levels that occurred for monocytes/macrophages and NK cells in  
763 the same spleens, but they were present in much lower amounts. At the same time, the CFU load  
764 in the various organs and blood was decreasing or close to the limit of detection. At the end of  
765 the IP challenge study (59 days PI) we saw a significant fold increase in  
766 monocytes/macrophages, granulocytes, and NK cells, with former cells being the most abundant  
767 at 59 days PI. In the aerosol challenged mice, however, the maximum level of Ly6G+

768 granulocytes in spleens was detected at 15 days PI in both BALB/c and C57BL/6 mice (25.5-  
769 and 17.2-fold increase, respectively), but the peak amounts were lower than detected in the IP  
770 challenged mice. After 22 days PI in the spleens of aerosol infected BALB/c mice, the amount  
771 of Ly6G+ granulocytes was still 15.5-fold over the control naïve mice levels, while in the  
772 spleens of C57BL/6 mice 22 days PI they were down to 3.4-fold over the control mice. This  
773 may be because the spleens of the same BALB/c mice 22 days PI had still a modest amount of  
774 CFU (geometric mean >100 CFU/g), while spleens from C57BL/6 mice had barely detectable  
775 numbers of CFU at the same time.

776           Besides the differences that we noted in the expression of cytokines/chemokines between  
777 BALB/c and C57BL/6 mice there were some differences in the expression of  
778 cytokines/chemokines that we detected between mice challenged by either the IP or aerosol  
779 route. In serum of BALB/c mice that were challenged by aerosol, we detected more  
780 cytokines/chemokines present for up to 22 days PI than we do in sera from mice that were  
781 infected by the IP route. We saw heightened levels of IFN- $\gamma$ , IP-10, IL-1B, IL-6, and we  
782 detected longer expression of MIG over the period measured in the aerosol exposed BALB/c  
783 mice. In the sera of IP infected BALB/c mice, we detected a more defined peak of cytokines 2  
784 days PI than in the sera of aerosol exposed mice. In the latter case, we saw a broader peak of  
785 cytokines/chemokines, which might be because of the more gradual increase in CFU in organs of  
786 the aerosol challenged mice. We detected some cytokines/chemokines in the sera of BALB/c  
787 mice infected by the IP route, such as KC and IL-1a that appeared to be immediately expressed  
788 upon exposure to *B. pseudomallei* K96243. KC is a chemokine that is a major chemoattractant  
789 for neutrophils, and it has been suggested that it may be a homolog of the human IL-8 from its  
790 ability to bind to a murine IL8 type B receptor [76]. IL-1 $\alpha$  and IL-1 $\beta$  are proinflammatory

791 cytokines that are the host's innate immune response to exposure to the pathogen. One common  
792 phenomenon we observed in sera from C57BL/6 mice that were challenged by either IP or  
793 aerosol at day 2 PI was an enormous, transient increase of MIG that we did not observe in sera of  
794 *B. pseudomallei* K96243 infected BALB/c mice by either route. It went up to 230-fold above  
795 what was normally seen in naïve mice in both cases. MIG and IP-10, the latter which was also  
796 elevated, belong to the CXCL family of chemokines, CXCL9 and CXCL10, respectively, which  
797 are both induced by IFN- $\gamma$  and share the same receptor CXCR3 (as well as CXCL11 or I-TAC)  
798 [77]. The expression of CXCL9 (MIG) can be detected in many antigen presenting cells, and the  
799 receptor CXCR3 is present on activated T cells and B cells that may influence both cellular  
800 immunity and antibody responses to the presence of a pathogen [78, 79]. The expression of IP-  
801 10, in addition, can also be induced by IFN- $\alpha$  and IFN- $\beta$  [78], and it can be secreted by  
802 monocytes, endothelial cells, fibroblasts, and keratinocytes [80]. In our present study, we  
803 observed more IFN- $\gamma$  in serum from both BALB/c and C57BL/6 mice that were exposed to *B.*  
804 *pseudomallei* K96243 by aerosol than the IP infected mice, and although we saw a higher peak  
805 of MIG in sera (at day 2 PI) from IP infected BALB/c mice, the elevated levels of MIG and IP-  
806 10 in sera from pathogen aerosol exposed were observed for a longer period after infection.  
807 Elevated levels of IP-10 and MIG have been observed in severe human melioidosis cases  
808 previously on admission in a clinical setting and during antibiotic treatment [81].

809 When we compared the cytokines/chemokines in spleen extracts from IP infected mice  
810 with that from the aerosol infected mice, we saw many more elevated levels of  
811 cytokines/chemokines that we were able to detect for a longer period of time in spleen extracts  
812 from both BALB/c and C57BL/6 mice exposed to *B. pseudomallei* by aerosol compared to that  
813 in spleen extracts from mice exposed to the pathogen by IP injection. In the spleen extracts from

814 BALB/c IP exposed mice we saw 6 cytokines/chemokines that were elevated (MIG, IP-10, IFN-  
815  $\gamma$ , IL-1 $\alpha$ , and IL-1 $\beta$ ) early in the study (0 – 22 days PI). In spleen extracts from C57BL/6 IP  
816 exposed mice, we detected the same cytokines/chemokines in addition to the chemokine KC.  
817 The peak level of several of the cytokines/chemokine detected in spleen extracts in both cases  
818 occurred at 15-22 days PI (excluding the immediate expression that occurred at 0 days PI) where  
819 IL-1 $\alpha$ , IL-1 $\beta$ , and MIG were the primary elevated cytokines/chemokine at that time. The number  
820 and amount of cytokines/chemokines in the aerosol challenged mice were higher until the end of  
821 the study (22 days and 90 days PI for BALB/c and C57BL/6 mice, respectively) which might  
822 reflect the CFU recovered from the aerosol infected mice. In lungs, spleens, and livers from  
823 C57BL/6 mice, the peak of CFU recovered (geometric mean) occurred at 2 days PI, while in the  
824 same organs from BALB/c mice the peak of CFU (geometric mean) occurred approximately 7  
825 days PI. In spleen extracts from the aerosol infected mice, there were two peaks in the amount of  
826 cytokines/chemokines in both mouse species: one at 2 days PI, and another at approximately 15  
827 days PI. Up to 22 days PI (after that period there were not enough BALB/c mice left to examine)  
828 we saw at least elevated amounts of 12 cytokines/chemokines: IFN- $\gamma$ , MIG, IP-10, FGFb, IL-1 $\alpha$ ,  
829 IL-1 $\beta$ , IL-2, IL-4, IL-12, and VEGF. In spleen extracts from BALB/c mice we also saw elevated  
830 levels of TNF- $\alpha$  but not in spleen extracts from C57BL/6 mice. There was a noticeable decrease  
831 in the level of cytokines/chemokines at 59 days PI in spleen extracts from aerosol infected  
832 C57BL/6 mice, but there was still a modest amount of some of these (Figure S4: IL-1 $\alpha$ , IL-1 $\beta$ ,  
833 IL-2, IL-12, MIG, FGFb, VEGF, MIP-1 $\alpha$ ) at the end of the study.

834 In conclusion, Ly6G+ granulocytes were the major infiltrating cells in both IP and  
835 aerosol infected mice, but they reached higher levels and reached a maximum period PI around  
836 22 days in IP infected mice, while in aerosol challenged mice they peaked approximately 15 days

837 PI. The next most prevalent infiltrating cells in the infected spleen were the  
838 monocytes/macrophages and NK cells in both mouse strains and by either infection route. We  
839 saw more cytokines/chemokines in aerosol infected mice in serum and spleen extracts than in IP  
840 infected mice. MIG, IP-10, KC, as well as IFN- $\gamma$  appeared to play a dominate role in the early  
841 response period to *B. pseudomallei* in both mouse models, but in aerosol infected mice they were  
842 also present after 4-7 days PI. Because of the abundance of MIG and IP-10 which are  
843 chemoattractants of activated T-cells [78, 82], it may suggest that T-cells are involved in the  
844 infection, pathogenesis, and immunity to *B. pseudomallei*, although in this study we did not  
845 examine the activity of T cells [78, 82-86]. In IP infected mice IL-1a and IL-1B were the  
846 predominate innate immune inflammatory cytokines that were more apparent than in aerosol  
847 infected mice, with IL-1B which appears to be generated by a special cytosolic inflammasome  
848 and a deleterious cytokine the more prevalent of the two [74, 87, 88]. Finally, there appeared to  
849 be a mixed cytokine response with Th1- and Th2-like cytokines expressed in response to *B.*  
850 *pseudomallei* in the murine models even in the Th-1-like C57BL/6 mouse after aerosol infection.  
851 This immune response by the host may be partly responsible for the inability of the host to  
852 completely resolve the infection and could lead to a fatal outcome in both acute and chronic  
853 infections by *B. pseudomallei*.

854 The differences and similarities we highlighted here are important; however, we do not  
855 want to oversimplify or understate the complex process of selecting the appropriate model for  
856 melioidosis. Inherent differences between BALB/c and C57BL/6 mice are numerous and well  
857 documented. Whereas BALB/c mice mount a rapid and robust TH-2 like response, their  
858 adaptive Th-1 response is not as efficient nor long lasting when compared to that of C57BL/6  
859 mice [89-94]. The differential immune responses have been observed to include cellular

860 recruitment kinetics and downstream cellular functionality (i.e. cytokine and chemokine  
861 expression) [30, 38, 95]. Accordingly, BALB/c mice are known to be more susceptible to  
862 autoimmune disease [96-98] and are more susceptible to tumor proliferation in certain models  
863 [99-101]. BALB/c mice and macrophages derived from these mice are also well documented to  
864 be more susceptible to infectious diseases (to include bacteria, intracellular bacteria/parasites,  
865 and viruses) [36, 45, 92, 94, 102-112]. Thus, there are many factors that need to be taken into  
866 account when determining applicability of a mouse model and subsequently how to analyze  
867 these data from said models [91, 104, 113]. Additionally, when specifically examining *B.*  
868 *pseudomallei* the bacterial strain selection and route of infection are of the utmost importance.  
869 The virulence of the bacterial strains are known to vary substantially [40, 45, 50, 94, 102-104,  
870 114], and the route of infection can significantly alter the disease pathogenesis as well. In  
871 conclusion, the BALB/c and C57BL/6 mouse each model different parameters of melioidosis.  
872 BALB/c mice may be more appropriate for virulence testing/classification of bacterial strains,  
873 and C57BL/6 may be best suited for vaccine or therapeutic testing, and perhaps when taken  
874 together represent the best approach for understanding bacterial pathogenesis and efficacy testing  
875 of medical counter-measures.

876  
877 **ACKNOWLEDGEMENTS**

878  
879 This research was funded by the Medical Biological Defense Research Program; Defense Threat  
880 Reduction Agency (DTRA). The authors would like to thank Dr. David DeShazer for their critical  
881 review of this manuscript. Opinions, interpretations, conclusions and recommendations are those of the  
882 authors and are not necessarily endorsed by the U.S. Army.

883 **FIGURE LEGENDS**

884

885 **Figure 1. Analyses of daily recorded temperatures (A) and daily recorded weights (B) for**  
886 **mice challenged with *B. pseudomallei* K96243 delivered via the IP route.**

887

888 **Figure 2. Bacterial burden determined in mice challenged with *B. pseudomallei* K96243**  
889 **delivered via the IP route.** CFU/g for spleen (A), lungs (B), liver (C) and CFU/ml for blood (D)  
890 are depicted. The geometric mean for each group is indicated. BALB/C mice are depicted with  
891 open circles and C57BL/6 mice are depicted with filled squares. 5 mice were euthanized at each  
892 time point.

893

894 **Figure 3. Histopathology observed in mice with rear leg clinical signs associated with**  
895 **intraperitoneal challenge with *B. pseudomallei* K96243. A.** C57BL/6 euthanized on day 22  
896 post-infection showing clinical signs in the hind-end and tail. Tail, transverse section: Multiple  
897 pyogranulomas partially effacing vertebral body and associated soft tissues. H&E, 20X. B.  
898 BALB/c mouse euthanized on day 25 post-infection with rear-leg paralysis and labored  
899 breathing. Lumbar spine, longitudinal section: Pyogranulomatous inflammation partially  
900 effacing vertebral body and associated soft tissues. H&E, 40X.

901

902 **Figure 4. Histopathology observed in mice following intraperitoneal challenge with *B.***  
903 ***pseudomallei* K96243. A.** C57BL/6 mouse euthanized on day 2 post-infection Liver: Random  
904 foci of neutrophilic inflammation with individual hepatocyte necrosis/apoptosis (arrow). H&E,  
905 400X. **B.** C57BL/6 mouse euthanized on day 22 post-infection. Femoral bone marrow: Myeloid

906 hyperplasia with predominance of neutrophils. H&E, 400X. C. BALB/c mouse euthanized on  
907 day 20 post-infection with rear-leg paralysis. Spleen: Multiple pyogranulomas effacing red and  
908 white pulp. H&E, 40X.

909

910 **Figure 5. Cellular changes in spleens occurring in BALB/c and C57BL/6 mice after**  
911 **intraperitoneal infection with *B. pseudomallei* K96243.** Spleen homogenates were prepared  
912 from infected (A) BALB/c and (B) C57BL/6 mice over time, and the percent of each cell type  
913 examined was determined as described in the Material and Methods. For each mouse strain n  
914 was equal to 5 at each time point. The fold-change for each cell type was determined by  
915 dividing the percent of the cell type at each time point (reported in Table S1) by the percent of  
916 the cell type present in normal, naïve mice, where n was 10 for BALB/c and 4 for C57BL/6 mice  
917

918 **Figure 6. Changes in the amount of cytokines/chemokines in spleen extracts from BALB/c**  
919 **and C57BL/6 mice after intraperitoneal infection with *B. pseudomallei* K96243.** The amount  
920 of cytokines/chemokines present in spleen extracts (shown in Table S3) was determined as  
921 described in the Material and Methods. Only fold-changes in ten of the cytokines/chemokines  
922 are shown for (A) BALB/c and (B) C57BL/6 because they showed the most changes from  
923 normal levels after infection or were known to be important for host immunity, such as TNF- $\alpha$ .  
924 For each time point, n was equal to five for BALB/c and C57BL/6 mice. Fold-changes in  
925 cytokines/chemokines was determined by dividing the amount (pg/ml) present in the spleen  
926 extract by the amount present in normal, naïve mice, where n was 10 for BALB/c and 4 for  
927 C57BL/6 mice.

928

929 **Figure 7. Analyses of daily recorded temperatures (A) and daily recorded weights (B) for**  
930 **mice exposed to aerosolized *B. pseudomallei* K96243.**

931

932 **Figure 8. Bacterial burden determined in mice exposed to aerosolized *B. pseudomallei*.**

933 CFU/g for spleen (A), Lungs (B), Liver (C) and CFU/ml for blood (D) are depicted. The  
934 geometric mean for each group is indicated. BALB/C mice are depicted with open circles and  
935 C57BL/6 mice are depicted with filled squares. 5 mice were euthanized at each time point  
936 through day 22, after which the surviving BALB/c were used to perform histopathological  
937 analyses. N = 12 for C57BL/6 mice on day 91.

938

939 **Figure 9. Cranial histopathology observed in mice following exposure to aerosolized *B.***

940 ***pseudomallei* K96243. A.** BALB/c mouse euthanized on day 4 post-infection. Nasal cavity:  
941 Epithelial and subepithelial suppurative inflammation and necrosis. H&E, 100X. **B.** BALB/c  
942 mouse euthanized on day 10 when early endpoint-euthanasia criteria were met. Nasal cavity and  
943 calvarium: Suppurative inflammation arising in the nasal cavity (N) and extending through the  
944 cribriform plate (arrow) into the olfactory bulb and cerebrum (C). H&E 20X. **C.** BALB/c mouse  
945 euthanized on day 7 post-infection with clinical signs indicative of an inner ear-infection Middle  
946 ear: Suppurative inflammation and necrosis of epithelium (suppurative otitis media). H&E 200X

947

948 **Figure 10. Lung histopathology observed in mice following exposure to aerosolized *B.***

949 ***pseudomallei* K96243. A.** C57BL/6 mouse euthanized on day 2 post-infection. Lung:  
950 Multifocal random (embolic) suppurative pneumonia. H&E 20X. **B.** BALB/c mouse euthanized  
951 on day 4 post-infection. Lung: Suppurative inflammation and alveolar necrosis with numerous

952 short bacilli (arrow). H&E 600X. **C.** BALB/c mouse euthanized on day 7 post-infection. Lung:  
953 Focally extensive pyogranuloma. H&E 40X. **D.** Lung: Periphery of pyogranuloma with  
954 multinucleate giant cell macrophage formation. H&E 600X.

955 **Figure 11. Spleen histopathology observed in mice following exposure to aerosolized *B.***

956 ***pseudomallei* K96243.** BALB/c mouse euthanized on day 15 post-infection and displayed  
957 ruffled appearance at that time. Spleen: Multiple distinct pyogranulomas. H&E 20X.

958

959 **Figure 12. Changes in the amount of cytokines/chemokines in sera from BALB/c and**  
960 **C57BL/6 mice after aerosol exposure to *B. pseudomallei* K96243.** The amount of  
961 cytokines/chemokines present in sera (shown in Table S5) was determined as described in the  
962 Material and Methods section. For changes in cytokine/chemokine levels in sera from BALB/c  
963 mice (A), we show changes in levels up to 22 days PI because there were no survivors after that  
964 period. We also show changes in cytokine/chemokine levels in sera for C57BL/6 mice (B) up to  
965 22 days PI for comparison and not many significant changes occurred after 22 days PI in sera  
966 from C57BL/6 mice. For each mouse strain n was equal to 5 at each time point. Fold-changes in  
967 cytokines/chemokines were determined by dividing the amount (pg/ml) present in sera of  
968 exposed mice (Table S5) by the mount present in normal, naïve mice, where n was 10 for  
969 BALB/c and 4 for C57BL/6 mice. For C57BL/6 mice fold-change for MIG was not shown  
970 because it was very high (235-fold), and it would make it difficult to see the changes in the levels  
971 of the other cytokines/chemokines at the same time.

972 **Figure 13. Changes in the amount of cytokines/chemokines in spleen extracts from**  
973 **BALB/c and C57BL/6 mice after aerosol exposure to *B. pseudomallei* K96243.** The amount

974 of cytokines/chemokines present in spleen extracts (shown in Table S6) was determined as  
975 described in the Material and Methods section. For changes in cytokine/chemokine levels in  
976 spleen extracts from BALB/c mice (A), we show changes in levels up to 22 days PI because  
977 there were no survivors after that period. We also show changes in cytokines/chemokine levels  
978 in spleen extracts for C57BL/6 mice (B) for comparison although they were determined to 90  
979 days PI (see Table S6). For each time point, n was equal to five for BALB/c and C57BL/6 mice.  
980 Fold-changes in cytokines/chemokines was determined by dividing the amount (pg/ml shown in  
981 Table S6) present in the spleen extract by the amount present in normal, naïve mice, where n was  
982 10 for BALB/c and 4 for C57BL/6 mice.

983 **Figure 14. Cellular changes in spleens occurring in BALB/c and C57BL/6 mice after**  
984 **aerosol exposure to *B. pseudomallei* K96243.** Spleen homogenates were prepared from  
985 infected (A) BALB/c and (B) C57BL/6 mice over time, and the percent of each cell type  
986 examined was determined as described in the Material and Methods. After 22 days PI there were  
987 no BALB/c mice survivors. For each mouse strain n was equal to 5 at each time point. The  
988 fold-change for each cell type was determined by dividing the percent of the cell type at each  
989 time point (found in Table S4) by the percent of the cell type present in normal, naïve mice,  
990 where n was 10 for BALB/c and 4 for C47BL/6 mice.

991 **Figure 15. Representative micrographs demonstrating the presence of MNGC in mice**  
992 **exposed to aerosolized bacteria.** MNGCs (arrows) were observed in lungs (A) and spleens (B)  
993 in BALB/c mice and in lungs (C) of C57BL/6 mice.

994  
995

996

997

998 **Supporting Information**

999

1000 **Figure S1. Spleen weights of mice following intraperitoneal challenge with *B. pseudomallei***

1001 **K96243.** As observed previously, spleen weight can be indicative of intrinsic differences in host  
1002 immune response or bacterial replications [40, 50]. After IP infection with relative LD<sub>50</sub>  
1003 equivalents, trends in spleen weight in both BALB/c and C57BL/6 mice were comparable,  
1004 except on day 4 where C57BL/6 mice spleens were significantly larger than BALB/c mice mice  
1005 ( $P = 0.0122$ ).

1006

1007 **Figure S2. Spleen weights of mice following exposre to aerosolized *B. pseudomallei* K96243.**

1008 As observed previously, spleen weight can be indicative of intrinsic differences in host immune  
1009 response or bacterial replications [40, 50]. After exposre to low doses the spleens harvested  
1010 from BALB/c mice were significantly larger on days 15 and 22 post exposure ( $P = 0.0324$  and  
1011 0.0007, respectively).

1012

1013 **Figure S3. Changes in the amount of cytokines/chemokines in sera from BALB/c and**  
1014 **C57BL/6 mice after intraperitoneal infection with *B. pseudomallei* K96243.** The amount of  
1015 cytokines/chemokines present in sera (shown in Table S2) from infected (A) BALB/c and (B)  
1016 C57BL/6 mice was determined as described in the Material and Methods. The fold-change in  
1017 MIG levels in sera was not shown for C57BL/6 because it was very high at 2 days PI (231-fold),  
1018 and it would make it difficult to see changes in other cytokines/chemokines for comparison. For

1019 each time point, n was equal to 5 for BALB/c and C57BL/6 mice. Fold-change in  
1020 cytokines/chemokines was determined by dividing the amount (pg/ml) present in sera after  
1021 infection by the amount present in normal, naïve mice, where n was 10 for BALB/c and 4 for  
1022 C57BL/6 mice.

1023

1024 **Figure S4. Changes in the amount of cytokines/chemokines in sera and spleen from**  
1025 **C57BL/6 mice after aerosol exposure to *B. pseudomallei* K96243 through day 91 post**  
1026 **exposure to aerosolized bacteria.** The amount of cytokines/chemokines present in sera (shown  
1027 in Table S5) was determined as described in the Material and Methods section. For changes in  
1028 cytokine/chemokine levels in sera from C57BL/6 mice (A), we show changes in levels up to 91  
1029 days PI. We also show changes in cytokine/chemokine levels in spleen extracts for C57BL/6  
1030 mice (B) up to 91 days PI for comparison. For each mouse strain n was equal to 5 at each time  
1031 point. Fold-changes in cytokines/chemokines were determined by dividing the amount (pg/ml)  
1032 present in sera of exposed mice (Table S5) by the mount present in normal, naïve mice, where n  
1033 was 10 for BALB/c and 4 for C57BL/6 mice. For C57BL/6 mice fold-change for MIG was not  
1034 shown because it was very high (235-fold), and it would make it difficult to see the changes in  
1035 the levels of the other cytokines/chemokines at the same time.

1036

1037 **Table S1. Cellular changes in spleen composition in BALB/c and C57BL/6 mice after IP**  
1038 **challenge with *B. pseudomallei* K96243.**

1039

1040   **Table S2. Cytokines/chemokines in serum from BALB/c and C57BL/6 mice after IP**  
1041   **challenge with *B. pseudomallei* K96243.**

1042   **Table S3. Cytokines/chemokines in spleen extracts from BALB/c and C57BL/6 mice after**  
1043   **IP challenge with *B. pseudomallei* K96243.**

1044

1045   **Table S4. Cellular changes in spleen composition in BALB/c and C57BL/6 mice after**  
1046   **aerosol exposure to *B. pseudomallei* K96243.**

1047

1048   **Table S5. Cytokines/chemokines in sera from BALB/c and C57BL/6 mice after aerosol**  
1049   **exposure to *B. pseudomallei* K96243.**

1050

1051   **Table S6. Cytokines/chemokines in spleen extracts from BALB/c and C57BL/6 mice after**  
1052   **aerosol exposure to *B. pseudomallei* K96243.**

1053

1054

1055

1056

1057

1058

1059

1060

1061

1062

1063

1064

1065

1066

1067

1068

1069

1070

1071

1072  
1073  
1074  
1075

## 1076 REFERENCES

- 1077 1. Cheng, A.C. and B.J. Currie, *Melioidosis: epidemiology, pathophysiology, and management*. Clin  
1078 Microbiol Rev, 2005. **18**(2): p. 383-416.
- 1079 2. Churuangsuk, C., et al., *Characteristics, clinical outcomes and factors influencing mortality of*  
1080 *patients with melioidosis in southern Thailand: A 10-year retrospective study*. Asian Pac J Trop  
1081 Med, 2016. **9**(3): p. 256-60.
- 1082 3. Limmathurotsakul, D., et al., *Melioidosis caused by Burkholderia pseudomallei in drinking water,*  
1083 *Thailand, 2012*. Emerg Infect Dis, 2014. **20**(2): p. 265-8.
- 1084 4. Limmathurotsakul, D., et al., *Burkholderia pseudomallei is spatially distributed in soil in*  
1085 *northeast Thailand*. PLoS Negl Trop Dis, 2010. **4**(6): p. e694.
- 1086 5. Kaestli, M., et al., *Out of the ground: aerial and exotic habitats of the melioidosis bacterium*  
1087 *Burkholderia pseudomallei in grasses in Australia*. Environ Microbiol, 2012. **14**(8): p. 2058-70.
- 1088 6. Currie, B.J., *Melioidosis: an important cause of pneumonia in residents of and travellers returned*  
1089 *from endemic regions*. Eur Respir J, 2003. **22**(3): p. 542-50.
- 1090 7. Currie, B.J. and S.P. Jacups, *Intensity of rainfall and severity of melioidosis, Australia*. Emerg  
1091 Infect Dis, 2003. **9**(12): p. 1538-42.
- 1092 8. Aardema, H., et al., *Changing epidemiology of melioidosis? A case of acute pulmonary*  
1093 *melioidosis with fatal outcome imported from Brazil*. Epidemiol Infect, 2005. **133**(5): p. 871-5.
- 1094 9. Dance, D.A., *Melioidosis as an emerging global problem*. Acta Trop, 2000. **74**(2-3): p. 115-9.
- 1095 10. Gee, J.E., et al., *Burkholderia pseudomallei type G in Western Hemisphere*. Emerg Infect Dis,  
1096 2014. **20**(4): p. 682-684.
- 1097 11. Hassan, M.R., et al., *Incidence, risk factors and clinical epidemiology of melioidosis: a complex*  
1098 *socio-ecological emerging infectious disease in the Alor Setar region of Kedah, Malaysia*. BMC  
1099 Infect Dis, 2010. **10**: p. 302.
- 1100 12. Limmathurotsakul, D., et al., *Predicted global distribution of and burden of melioidosis*. Nat  
1101 Microbiol, 2016. **1**(1).
- 1102 13. Lo, T.J., et al., *Melioidosis in a tropical city state, Singapore*. Emerg Infect Dis, 2009. **15**(10): p.  
1103 1645-7.
- 1104 14. Rammaert, B., et al., *Pulmonary melioidosis in Cambodia: a prospective study*. BMC Infect Dis,  
1105 2011. **11**: p. 126.
- 1106 15. Zehnder, A.M., et al., *Burkholderia pseudomallei isolates in 2 pet iguanas, California, USA*. Emerg  
1107 Infect Dis, 2014. **20**(2): p. 304-6.
- 1108 16. O'Sullivan, B.P., et al., *Burkholderia pseudomallei infection in a child with cystic fibrosis:*  
1109 *acquisition in the Western Hemisphere*. Chest, 2011. **140**(1): p. 239-42.
- 1110 17. Doker, T.J., et al., *Contact Investigation of Melioidosis Cases Reveals Regional Endemicity in*  
1111 *Puerto Rico*. Clin Infect Dis, 2014.
- 1112 18. Hogan, C., et al., *Melioidosis in Trinidad and Tobago*. Emerg Infect Dis, 2015. **21**(5): p. 902-4.
- 1113 19. Sanford, J.P., *Melioidosis and Glanders*, in *Harrison's Principles of Internal Medicine*, W. J.D., B.  
1114 E., and I. K.J., Editors. 1991, McGraw-Hill, Inc.: New York, NY. p. 606-609.
- 1115 20. Vietri, N.J. and D. DeShazer, *Melioidosis*, in *Textbook of Military Medicine: Medical Aspect of*  
1116 *Biological Warfare*, Z. Dembek, Editor. 2007, Borden Institute Walter Reed Army Medical  
1117 Center: Washington, D.C. p. 147-166.

- 1118 21. Wiersinga, W.J., B.J. Currie, and S.J. Peacock, *Melioidosis*. N Engl J Med, 2012. **367**(11): p. 1035-  
1119 44.
- 1120 22. Yabuuchi, E. and M. Arakawa, *Burkholderia pseudomallei and melioidosis: be aware in*  
1121 *temperate area*. Microbiol Immunol, 1993. **37**(11): p. 823-36.
- 1122 23. Hatcher, C.L., L.A. Muruato, and A.G. Torres, *Recent Advances in Burkholderia mallei and B.*  
1123 *pseudomallei Research*. Curr Trop Med Rep, 2015. **2**(2): p. 62-69.
- 1124 24. Ngauy, V., et al., *Cutaneous melioidosis in a man who was taken as a prisoner of war by the*  
1125 *Japanese during World War II*. J Clin Microbiol, 2005. **43**(2): p. 970-2.
- 1126 25. Nandi, T. and P. Tan, *Less is more: Burkholderia pseudomallei and chronic melioidosis*. MBio,  
1127 2013. **4**(5): p. e00709-13.
- 1128 26. Suputtamongkol, Y., et al., *Risk factors for melioidosis and bacteremic melioidosis*. Clin Infect Dis,  
1129 1999. **29**(2): p. 408-13.
- 1130 27. Tamrakar, S.B. and C.N. Haas, *Dose-response model for Burkholderia pseudomallei (melioidosis)*.  
1131 J Appl Microbiol, 2008. **105**(5): p. 1361-71.
- 1132 28. Liu, X., et al., *Association of melioidosis incidence with rainfall and humidity, singapore, 2003-*  
1133 *2012*. Emerg Infect Dis, 2015. **21**(1): p. 159-62.
- 1134 29. Chen, P.S., et al., *Airborne Transmission of Melioidosis to Humans from Environmental Aerosols*  
1135 *Contaminated with B. pseudomallei*. PLoS Negl Trop Dis, 2015. **9**(6): p. e0003834.
- 1136 30. Titball, R.W., et al., *Burkholderia pseudomallei: animal models of infection*. Trans R Soc Trop  
1137 Med Hyg, 2008. **102 Suppl 1**: p. S111-6.
- 1138 31. van Schaik, E., et al., *Development of novel animal infection models for the study of acute and*  
1139 *chronic Burkholderia pseudomallei pulmonary infections*. Microbes Infect, 2008. **10**(12-13): p.  
1140 1291-9.
- 1141 32. DeShazer, D., et al., *Mutagenesis of Burkholderia pseudomallei with Tn5-OT182: isolation of*  
1142 *motility mutants and molecular characterization of the flagellin structural gene*. J Bacteriol,  
1143 1997. **179**(7): p. 2116-25.
- 1144 33. Kaufmann, A.F., et al., *Melioidosis in imported non-human primates*. J Wildl Dis, 1970. **6**(4): p.  
1145 211-9.
- 1146 34. Sprague, L.D. and H. Neubauer, *Melioidosis in animals: a review on epizootiology, diagnosis and*  
1147 *clinical presentation*. J Vet Med B Infect Dis Vet Public Health, 2004. **51**(7): p. 305-20.
- 1148 35. Barnes, J.L. and N. Ketheesan, *Route of infection in melioidosis*. Emerg Infect Dis, 2005. **11**(4): p.  
1149 638-9.
- 1150 36. Hoppe, I., et al., *Characterization of a murine model of melioidosis: comparison of different*  
1151 *strains of mice*. Infect Immun, 1999. **67**(6): p. 2891-900.
- 1152 37. Conejero, L., et al., *Low-dose exposure of C57BL/6 mice to burkholderia pseudomallei mimics*  
1153 *chronic human melioidosis*. Am J Pathol, 2011. **179**(1): p. 270-80.
- 1154 38. Leakey, A.K., G.C. Ulett, and R.G. Hirst, *BALB/c and C57Bl/6 mice infected with virulent*  
1155 *Burkholderia pseudomallei provide contrasting animal models for the acute and chronic forms of*  
1156 *human melioidosis*. Microb Pathog, 1998. **24**(5): p. 269-75.
- 1157 39. Tan, G.Y., et al., *Burkholderia pseudomallei aerosol infection results in differential inflammatory*  
1158 *responses in BALB/c and C57Bl/6 mice*. J Med Microbiol, 2008. **57**(Pt 4): p. 508-15.
- 1159 40. Welkos, S.L., et al., *Characterization of Burkholderia pseudomallei strains using a murine*  
1160 *intraperitoneal infection model and in vitro macrophage assays*. PLoS One, 2015. pii: S0882-  
1161 4010(15)00104-7. doi: 10.1371/journal.pone.0125004. [Epub ahead of print] PMID: 26162294
- 1162 41. West, T.E., et al., *Murine pulmonary infection and inflammation induced by inhalation of*  
1163 *Burkholderia pseudomallei*. Int J Exp Pathol, 2012. **93**(6): p. 421-8.

- 1164 42. West, T.E., et al., *Pathogenicity of high-dose enteral inoculation of Burkholderia pseudomallei to*  
1165 *mice*. Am J Trop Med Hyg, 2010. **83**(5): p. 1066-9.
- 1166 43. Lever, M.S., et al., *Experimental acute respiratory Burkholderia pseudomallei infection in BALB/c*  
1167 *mice*. Int J Exp Pathol, 2009. **90**(1): p. 16-25.
- 1168 44. Jeddeloh, J.A., et al., *Biodefense-driven murine model of pneumonic melioidosis*. Infect Immun,  
1169 2003. **71**(1): p. 584-7.
- 1170 45. Challacombe, J.F., et al., *Interrogation of the Burkholderia pseudomallei Genome to Address*  
1171 *Differential Virulence among Isolates*. PLoS One, 2014. **9**(12): p. e115951.
- 1172 46. Welkos, S.L., et al., *Characterization of Burkholderia pseudomallei Strains Using a Murine*  
1173 *Intraperitoneal Infection Model and In Vitro Macrophage Assays*. PLoS One, 2015. **10**(4): p.  
1174 e0124667.
- 1175 47. Chua, K.L., Y.Y. Chan, and Y.H. Gan, *Flagella are virulence determinants of Burkholderia*  
1176 *pseudomallei*. Infect Immun, 2003. **71**(4): p. 1622-9.
- 1177 48. Dannenberg, A.M., Jr. and E.M. Scott, *Melioidosis: pathogenesis and immunity in mice and*  
1178 *hamsters. I. Studies with virulent strains of Malleomyces pseudomallei*. J Exp Med, 1958. **107**(1):  
1179 p. 153-66.
- 1180 49. Nieves, W., et al., *A Burkholderia pseudomallei outer membrane vesicle vaccine provides*  
1181 *protection against lethal sepsis*. Clin Vaccine Immunol, 2014. **21**(5): p. 747-54.
- 1182 50. Amemiya, K., et al., *Comparison of the early host immune response to two widely diverse virulent*  
1183 *strains of Burkholderia pseudomallei that cause acute and chronic infections in BALB/c mice*.  
1184 Microb Pathog, 2015.
- 1185 51. Massey, S., et al., *Comparative Burkholderia pseudomallei natural history virulence studies using*  
1186 *an aerosol murine model of infection*. Sci Rep, 2014. **4**: p. 4305.
- 1187 52. Horton, R.E., et al., *Quorum sensing negatively regulates multinucleate cell formation during*  
1188 *intracellular growth of Burkholderia pseudomallei in macrophage-like cells*. PLoS One, 2013.  
1189 **8**(5): p. e63394.
- 1190 53. Pegoraro, G., et al., *A high-content imaging assay for the quantification of the Burkholderia*  
1191 *pseudomallei induced multinucleated giant cell (MNGC) phenotype in murine macrophages*. BMC  
1192 Microbiol, 2014. **14**: p. 98.
- 1193 54. Wand, M.E., et al., *Macrophage and Galleria mellonella infection models reflect the virulence of*  
1194 *naturally occurring isolates of B. pseudomallei, B. thailandensis and B. oklahomensis*. BMC  
1195 Microbiol, 2011. **11**(1): p. 11.
- 1196 55. Kespitchayawattana, W., et al., *Burkholderia pseudomallei induces cell fusion and actin-*  
1197 *associated membrane protrusion: a possible mechanism for cell-to-cell spreading*. Infect Immun,  
1198 2000. **68**(9): p. 5377-84.
- 1199 56. Harley, V.S., et al., *Effects of Burkholderia pseudomallei and other Burkholderia species on*  
1200 *eukaryotic cells in tissue culture*. Microbios, 1998. **96**(384): p. 71-93.
- 1201 57. Mulye, M., et al., *Delineating the importance of serum opsonins and the bacterial capsule in*  
1202 *affecting the uptake and killing of Burkholderia pseudomallei by murine neutrophils and*  
1203 *macrophages*. PLoS Negl Trop Dis, 2014. **8**(8): p. e2988.
- 1204 58. Chirakul, S., et al., *Characterization of BPSS1521 (bprD), a regulator of Burkholderia*  
1205 *pseudomallei virulence gene expression in the mouse model*. PLoS One, 2014. **9**(8): p. e104313.
- 1206 59. Fisher, N.A., et al., *The Madagascar hissing cockroach as a novel surrogate host for Burkholderia*  
1207 *pseudomallei, B. mallei and B. thailandensis*. BMC Microbiol, 2012. **12**: p. 117.
- 1208 60. Wong, K.T., S.D. Puthucheary, and J. Vadivelu, *The histopathology of human melioidosis*.  
1209 Histopathology, 1995. **26**(1): p. 51-5.

- 1210 61. Zumbrun, E.E., et al., *Development of a murine model for aerosolized ebolavirus infection using a*  
1211 *panel of recombinant inbred mice*. Viruses, 2012. **4**(12): p. 3468-93.
- 1212 62. Davis, K.J., et al., *Bacterial filamentation of Yersinia pestis by beta-lactam antibiotics in*  
1213 *experimentally infected mice*. Arch Pathol Lab Med, 1997. **121**(8): p. 865-8.
- 1214 63. Amemiya, K., et al., *Interleukin-12 induces a Th1-like response to Burkholderia mallei and limited*  
1215 *protection in BALB/c mice*. Vaccine, 2006. **24**(9): p. 1413-20.
- 1216 64. Patil, H.G., et al., *Musculoskeletal melioidosis: An under-diagnosed entity in developing*  
1217 *countries*. J Orthop, 2016. **13**(1): p. 40-2.
- 1218 65. Raja, N.S. and C. Scarsbrook, *Burkholderia Pseudomallei Causing Bone and Joint Infections: A*  
1219 *Clinical Update*. Infect Dis Ther, 2016.
- 1220 66. McInnes, E.F., *Background Lesions in Laboratory Animals: A Color Atlas*. 2012, New York, NY:  
1221 Saunders Elsevier. 48-53.
- 1222 67. Allwood, E.M., et al., *Strategies for Intracellular Survival of Burkholderia pseudomallei*. Front  
1223 Microbiol, 2011. **2**: p. 170.
- 1224 68. Thomas, R.J., et al., *Particle-size dependent effects in the Balb/c murine model of inhalational*  
1225 *melioidosis*. Front Cell Infect Microbiol, 2012. **2**: p. 101.
- 1226 69. St John, J.A., et al., *Burkholderia pseudomallei penetrates the brain via destruction of the*  
1227 *olfactory and trigeminal nerves: implications for the pathogenesis of neurological melioidosis*.  
1228 MBio, 2014. **5**(2): p. e00025.
- 1229 70. Lafontaine, E.R., et al., *Use of a safe, reproducible, and rapid aerosol delivery method to study*  
1230 *infection by Burkholderia pseudomallei and Burkholderia mallei in mice*. PLoS One, 2013. **8**(10):  
1231 p. e76804.
- 1232 71. Revelli, D.A., J.A. Boylan, and F.C. Gherardini, *A non-invasive intratracheal inoculation method*  
1233 *for the study of pulmonary melioidosis*. Front Cell Infect Microbiol, 2012. **2**: p. 164.
- 1234 72. Suparak, S., et al., *M multinucleated giant cell formation and apoptosis in infected host cells is*  
1235 *mediated by Burkholderia pseudomallei type III secretion protein BipB*. J Bacteriol, 2005. **187**(18):  
1236 p. 6556-60.
- 1237 73. Laws, T.R., et al., *Neutrophils are the predominant cell-type to associate with Burkholderia*  
1238 *pseudomallei in a BALB/c mouse model of respiratory melioidosis*. Microb Pathog, 2011. **51**(6): p.  
1239 471-5.
- 1240 74. Ceballos-Olvera, I., et al., *Inflammasome-dependent pyroptosis and IL-18 protect against*  
1241 *Burkholderia pseudomallei lung infection while IL-1beta is deleterious*. PLoS Pathog, 2011. **7**(12):  
1242 p. e1002452.
- 1243 75. Easton, A., et al., *A critical role for neutrophils in resistance to experimental infection with*  
1244 *Burkholderia pseudomallei*. J Infect Dis, 2007. **195**(1): p. 99-107.
- 1245 76. Bozic, C.R., et al., *The murine interleukin 8 type B receptor homologue and its ligands. Expression*  
1246 *and biological characterization*. J Biol Chem, 1994. **269**(47): p. 29355-8.
- 1247 77. Nomiyama, H., N. Osada, and O. Yoshie, *Systematic classification of vertebrate chemokines*  
1248 *based on conserved synteny and evolutionary history*. Genes Cells, 2013. **18**(1): p. 1-16.
- 1249 78. Farber, J.M., *Mig and IP-10: CXC chemokines that target lymphocytes*. J Leukoc Biol, 1997. **61**(3):  
1250 p. 246-57.
- 1251 79. Park, M.K., et al., *The CXC chemokine murine monokine induced by IFN-gamma (CXC chemokine*  
1252 *ligand 9) is made by APCs, targets lymphocytes including activated B cells, and supports antibody*  
1253 *responses to a bacterial pathogen in vivo*. J Immunol, 2002. **169**(3): p. 1433-43.
- 1254 80. Luster, A.D. and J.V. Ravetch, *Biochemical characterization of a gamma interferon-inducible*  
1255 *cytokine (IP-10)*. J Exp Med, 1987. **166**(4): p. 1084-97.

- 1256 81. Lauw, F.N., et al., *The CXC chemokines gamma interferon (IFN-gamma)-inducible protein 10 and*  
 1257 *monokine induced by IFN-gamma are released during severe melioidosis*. Infect Immun, 2000.  
 1258 **68**(7): p. 3888-93.
- 1259 82. Loetscher, M., et al., *Chemokine receptor specific for IP10 and mig: structure, function, and*  
 1260 *expression in activated T-lymphocytes*. J Exp Med, 1996. **184**(3): p. 963-9.
- 1261 83. Barnes, J.L., et al., *Adaptive immunity in melioidosis: a possible role for T cells in determining*  
 1262 *outcome of infection with Burkholderia pseudomallei*. Clin Immunol, 2004. **113**(1): p. 22-8.
- 1263 84. Haque, A., et al., *Role of T cells in innate and adaptive immunity against murine Burkholderia*  
 1264 *pseudomallei infection*. J Infect Dis, 2006. **193**(3): p. 370-9.
- 1265 85. Jenjaroen, K., et al., *T-Cell Responses Are Associated with Survival in Acute Melioidosis Patients*.  
 1266 PLoS Negl Trop Dis, 2015. **9**(10): p. e0004152.
- 1267 86. Wiersinga, W.J., et al., *Melioidosis: insights into the pathogenicity of Burkholderia pseudomallei*.  
 1268 Nat Rev Microbiol, 2006. **4**(4): p. 272-82.
- 1269 87. Bast, A., et al., *Caspase-1-dependent and -independent cell death pathways in Burkholderia*  
 1270 *pseudomallei infection of macrophages*. PLoS Pathog, 2014. **10**(3): p. e1003986.
- 1271 88. Rathinam, V.A., et al., *TRIF licenses caspase-11-dependent NLRP3 inflammasome activation by*  
 1272 *gram-negative bacteria*. Cell, 2012. **150**(3): p. 606-19.
- 1273 89. Chen, X., J.J. Oppenheim, and O.M. Howard, *BALB/c mice have more CD4+CD25+ T regulatory*  
 1274 *cells and show greater susceptibility to suppression of their CD4+CD25- responder T cells than*  
 1275 *C57BL/6 mice*. J Leukoc Biol, 2005. **78**(1): p. 114-21.
- 1276 90. Kuroda, E., T. Kito, and U. Yamashita, *Reduced expression of STAT4 and IFN-gamma in*  
 1277 *macrophages from BALB/c mice*. J Immunol, 2002. **168**(11): p. 5477-82.
- 1278 91. Sellers, R.S., et al., *Immunological variation between inbred laboratory mouse strains: points to*  
 1279 *consider in phenotyping genetically immunomodified mice*. Vet Pathol, 2012. **49**(1): p. 32-43.
- 1280 92. Wakeham, J., J. Wang, and Z. Xing, *Genetically determined disparate innate and adaptive cell-*  
 1281 *mediated immune responses to pulmonary Mycobacterium bovis BCG infection in C57BL/6 and*  
 1282 *BALB/c mice*. Infect Immun, 2000. **68**(12): p. 6946-53.
- 1283 93. Watanabe, H., et al., *Innate immune response in Th1- and Th2-dominant mouse strains*. Shock,  
 1284 2004. **22**(5): p. 460-6.
- 1285 94. Watkiss, E.R., et al., *Innate and adaptive immune response to pneumonia virus of mice in a*  
 1286 *resistant and a susceptible mouse strain*. Viruses, 2013. **5**(1): p. 295-320.
- 1287 95. Depke, M., et al., *Bone marrow-derived macrophages from BALB/c and C57BL/6 mice*  
 1288 *fundamentally differ in their respiratory chain complex proteins, lysosomal enzymes and*  
 1289 *components of antioxidant stress systems*. J Proteomics, 2014. **103**: p. 72-86.
- 1290 96. Caspi, R.R., et al., *T cell mechanisms in experimental autoimmune uveoretinitis: susceptibility is a*  
 1291 *function of the cytokine response profile*. Eye (Lond), 1997. **11 ( Pt 2)**: p. 209-12.
- 1292 97. Graus, Y.M., P.J. van Breda Vriesman, and M.H. de Baets, *Characterization of anti-acetylcholine*  
 1293 *receptor (AChR) antibodies from mice differing in susceptibility for experimental autoimmune*  
 1294 *myasthenia gravis (EAMG)*. Clin Exp Immunol, 1993. **92**(3): p. 506-13.
- 1295 98. Sun, B., et al., *Genetic susceptibility to experimental autoimmune uveitis involves more than a*  
 1296 *predisposition to generate a T helper-1-like or a T helper-2-like response*. J Immunol, 1997.  
 1297 **159**(2): p. 1004-11.
- 1298 99. Kuraguchi, M., et al., *Differences in susceptibility to colonic stem cell somatic mutation in three*  
 1299 *strains of mice*. J Pathol, 2001. **193**(4): p. 517-21.
- 1300 100. Medina, D., *Mammary tumorigenesis in chemical carcinogen-treated mice. I. Incidence in BALB-c*  
 1301 *and C57BL mice*. J Natl Cancer Inst, 1974. **53**(1): p. 213-21.

- 1302 101. Ullrich, R.L., et al., *Strain-dependent susceptibility to radiation-induced mammary cancer is a*  
1303 *result of differences in epithelial cell sensitivity to transformation.* Radiat Res, 1996. **146**(3): p.  
1304 353-5.
- 1305 102. Jiang, X., et al., *Differences in innate immune responses correlate with differences in murine*  
1306 *susceptibility to Chlamydia muridarum pulmonary infection.* Immunology, 2010. **129**(4): p. 556-  
1307 66.
- 1308 103. Reiner, S.L. and R.M. Locksley, *The regulation of immunity to Leishmania major.* Annu Rev  
1309 Immunol, 1995. **13**: p. 151-77.
- 1310 104. Stundick, M.V., et al., *Animal models for Francisella tularensis and Burkholderia species:*  
1311 *scientific and regulatory gaps toward approval of antibiotics under the FDA Animal Rule.* Vet  
1312 Pathol, 2013. **50**(5): p. 877-92.
- 1313 105. Weening, E.H., et al., *The dependence of the Yersinia pestis capsule on pathogenesis is*  
1314 *influenced by the mouse background.* Infect Immun, 2011. **79**(2): p. 644-52.
- 1315 106. Breitbach, K., et al., *Role of inducible nitric oxide synthase and NADPH oxidase in early control of*  
1316 *Burkholderia pseudomallei infection in mice.* Infect Immun, 2006. **74**(11): p. 6300-9.
- 1317 107. Brenner, G.J., N. Cohen, and J.A. Moynihan, *Similar immune response to nonlethal infection with*  
1318 *herpes simplex virus-1 in sensitive (BALB/c) and resistant (C57BL/6) strains of mice.* Cell  
1319 Immunol, 1994. **157**(2): p. 510-24.
- 1320 108. Hancock, G.E., R.W. Schaedler, and T.T. MacDonald, *Yersinia enterocolitica infection in resistant*  
1321 *and susceptible strains of mice.* Infect Immun, 1986. **53**(1): p. 26-31.
- 1322 109. Heinzel, F.P., R.M. Rerko, and A.M. Hujer, *Underproduction of interleukin-12 in susceptible mice*  
1323 *during progressive leishmaniasis is due to decreased CD40 activity.* Cell Immunol, 1998. **184**(2):  
1324 p. 129-42.
- 1325 110. Kohler, J., et al., *NADPH-oxidase but not inducible nitric oxide synthase contributes to resistance*  
1326 *in a murine Staphylococcus aureus Newman pneumonia model.* Microbes Infect, 2011. **13**(11): p.  
1327 914-22.
- 1328 111. Tabel, H., R.S. Kaushik, and J.E. Uzonna, *Susceptibility and resistance to Trypanosoma congolense*  
1329 *infections.* Microbes Infect, 2000. **2**(13): p. 1619-29.
- 1330 112. Kaushik, R.S., et al., *Innate resistance to experimental African trypanosomiasis: differences in*  
1331 *cytokine (TNF-alpha, IL-6, IL-10 and IL-12) production by bone marrow-derived macrophages*  
1332 *from resistant and susceptible mice.* Cytokine, 2000. **12**(7): p. 1024-34.
- 1333 113. Limmathurotsakul, D., et al., *Consensus on the development of vaccines against naturally*  
1334 *acquired melioidosis.* Emerg Infect Dis, 2015. **21**(6).
- 1335 114. Sahl, J.W., et al., *Genomic characterization of Burkholderia pseudomallei isolates selected for*  
1336 *medical countermeasures testing: comparative genomics associated with differential virulence.*  
1337 PLoS One, 2015. **10**(3): p. e0121052.

1338

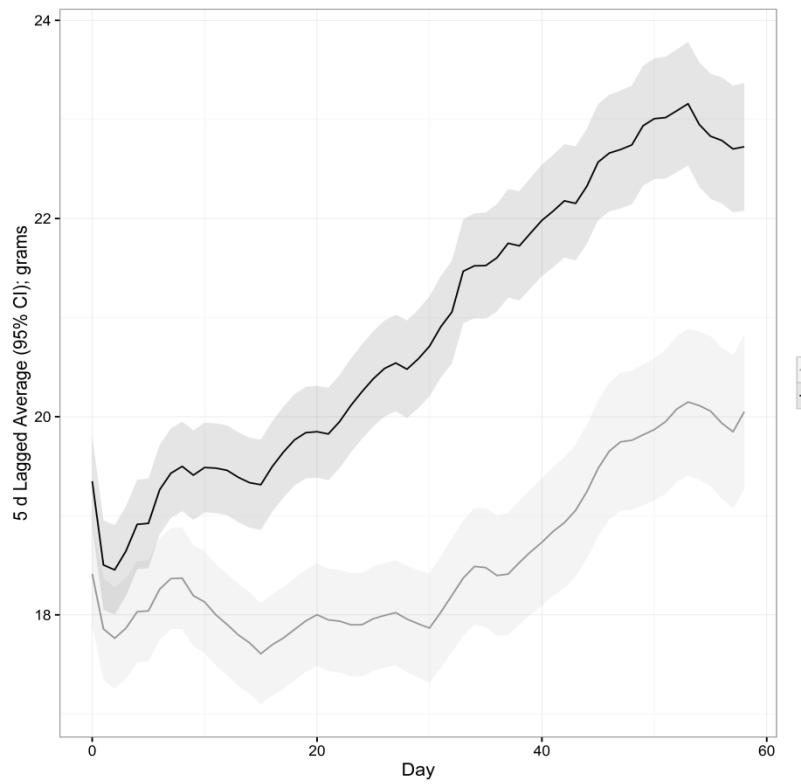
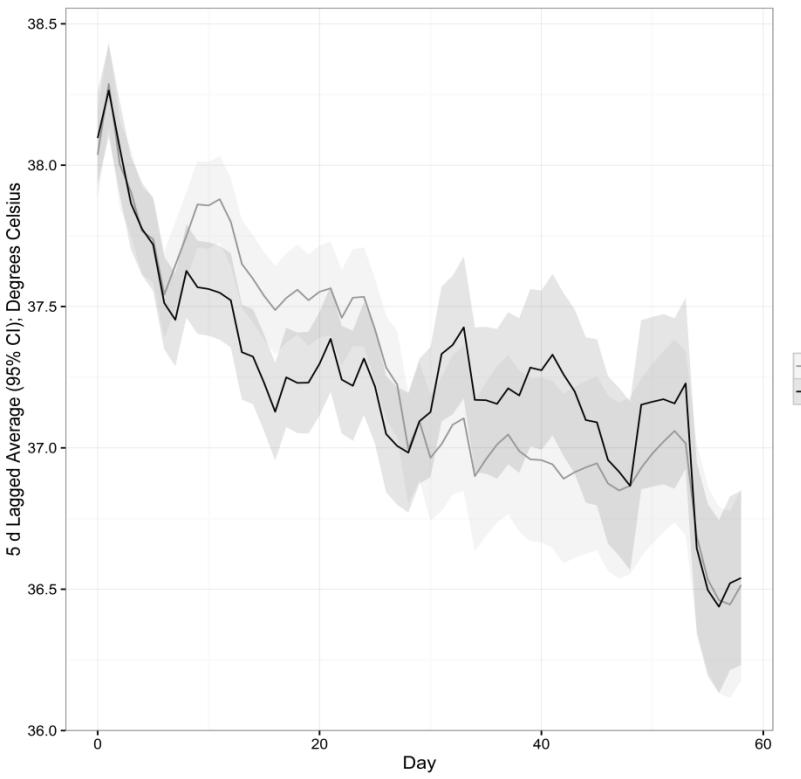


Figure 1

UNCLASSIFIED

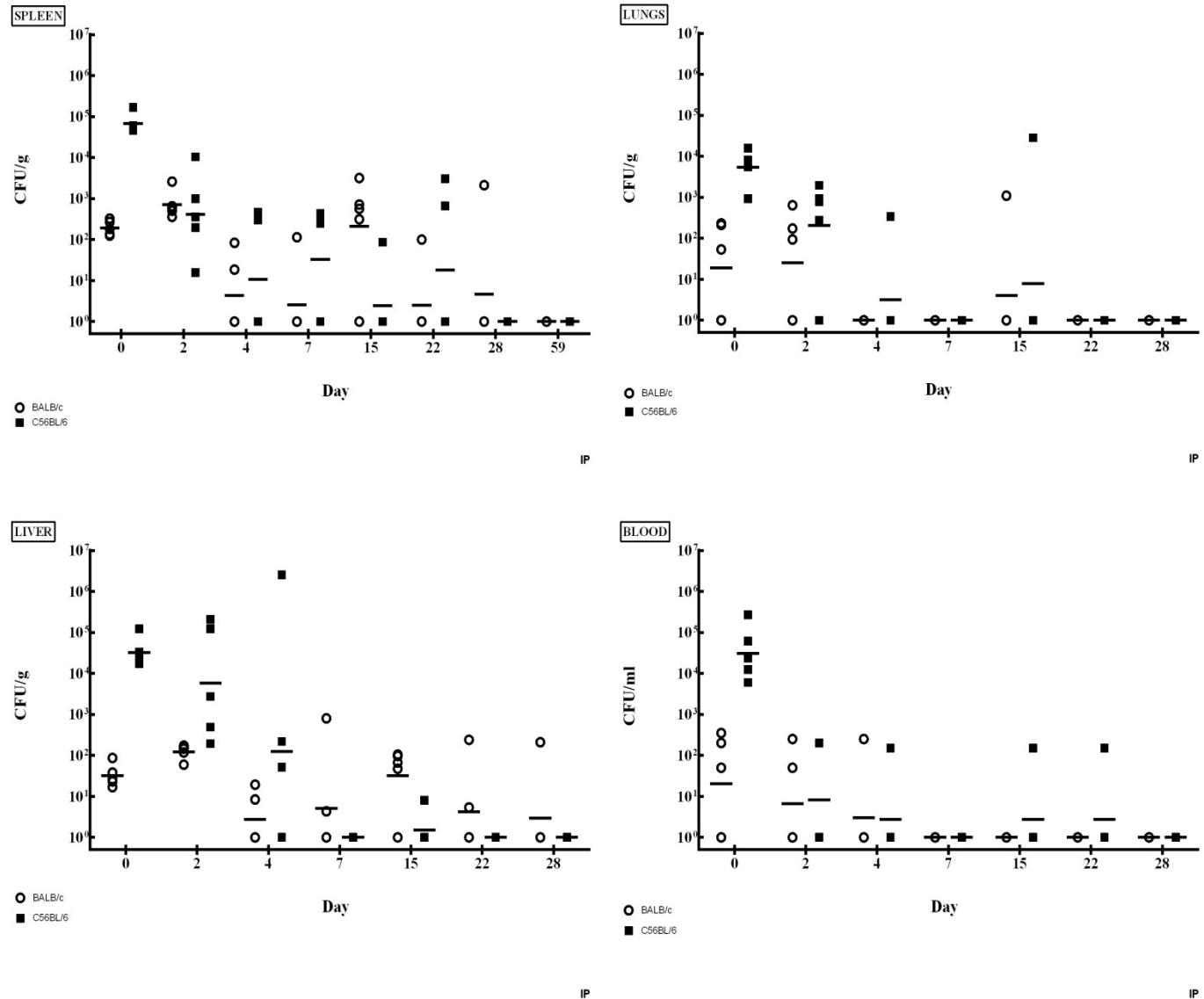


Figure 2

UNCLASSIFIED

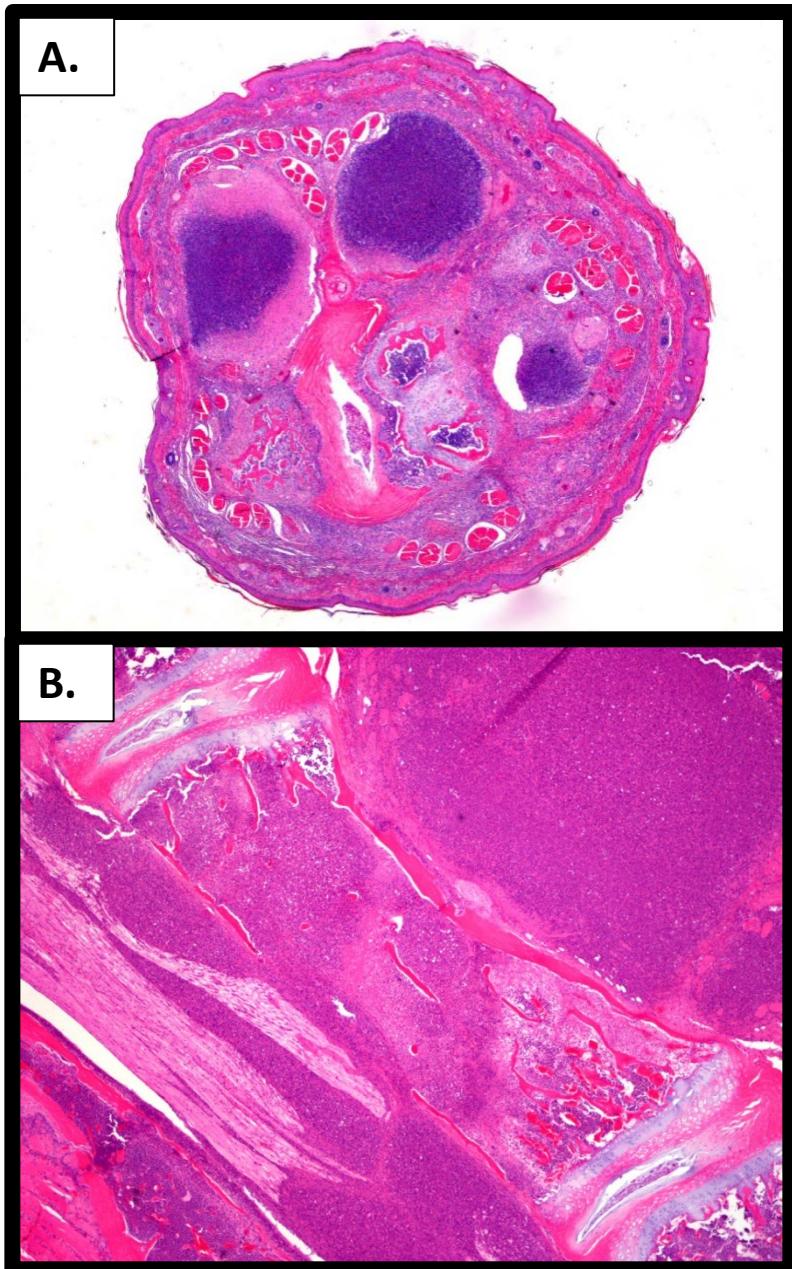


Figure 3

UNCLASSIFIED

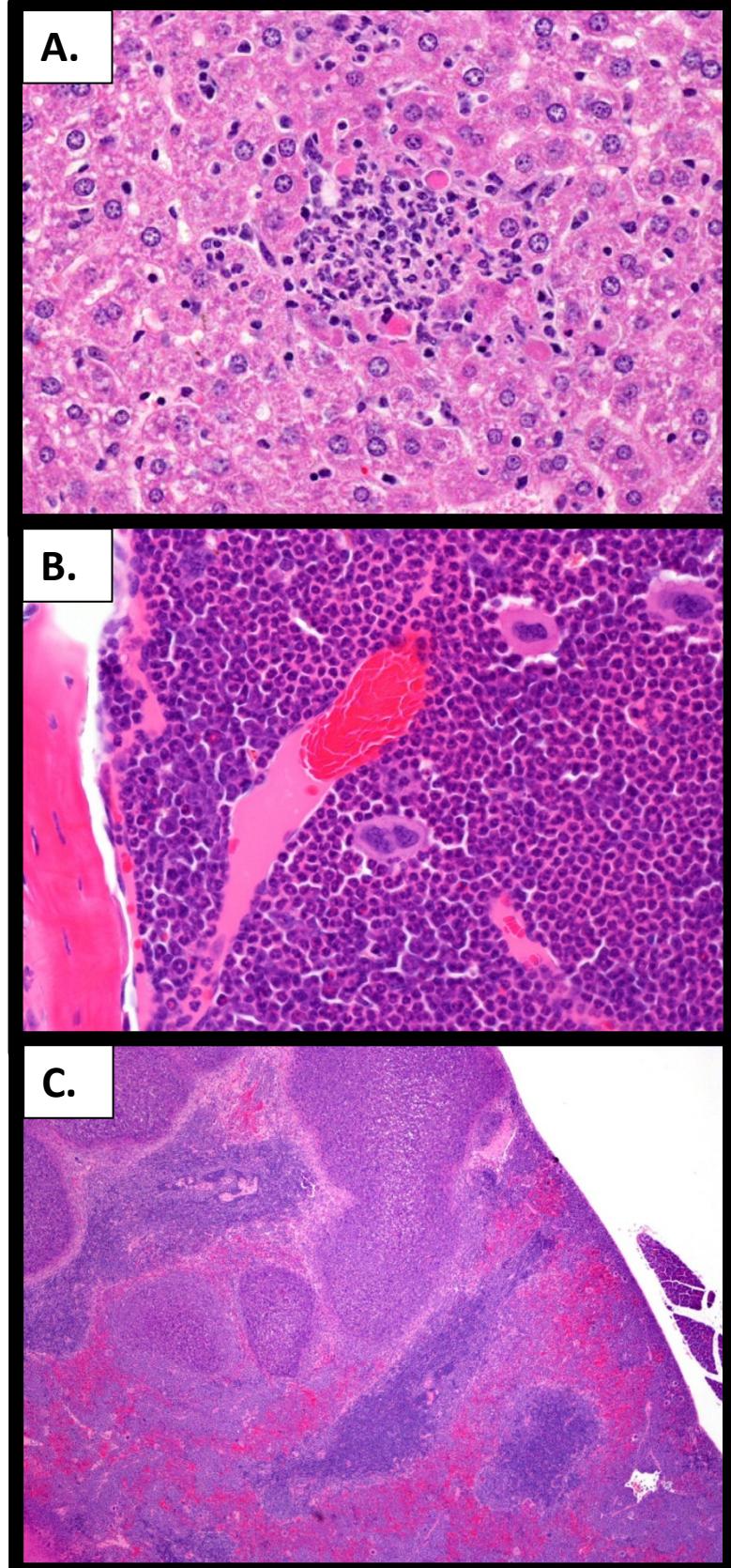


Figure 4

UNCLASSIFIED

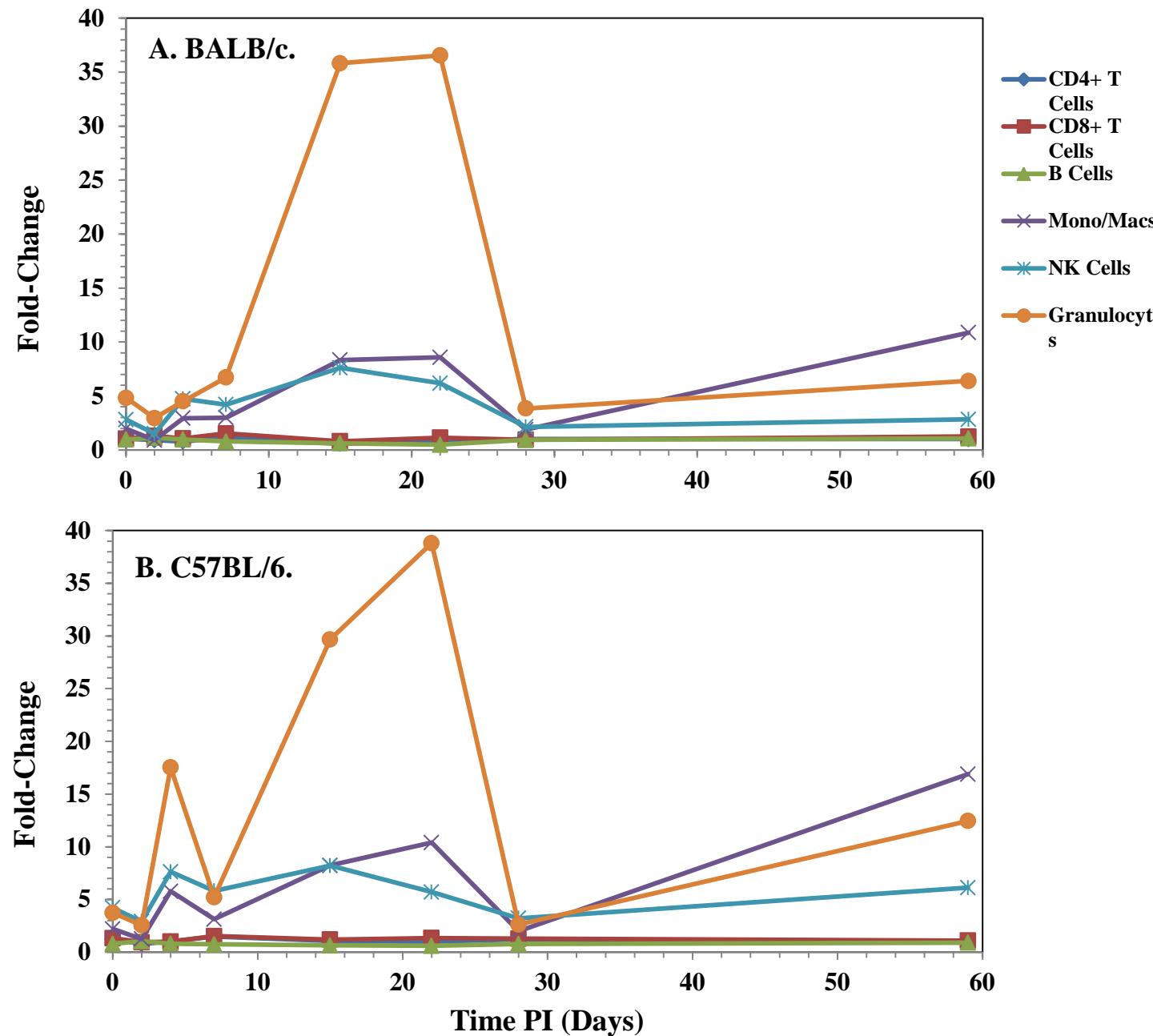


Figure 5 cell distribution after IP infection

UNCLASSIFIED

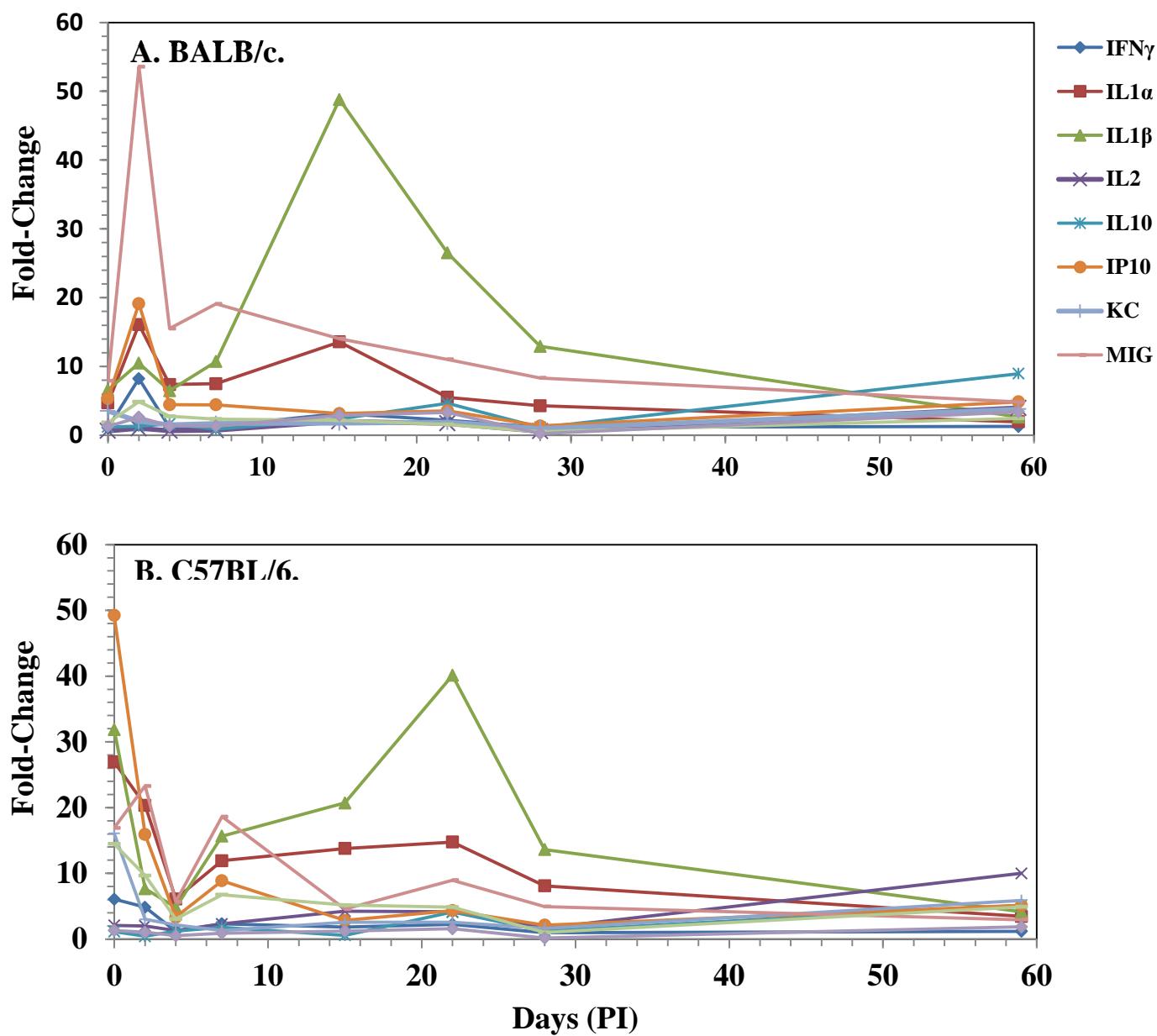


Figure 6-cytokine panel from spleen extracts after IP challenge

UNCLASSIFIED

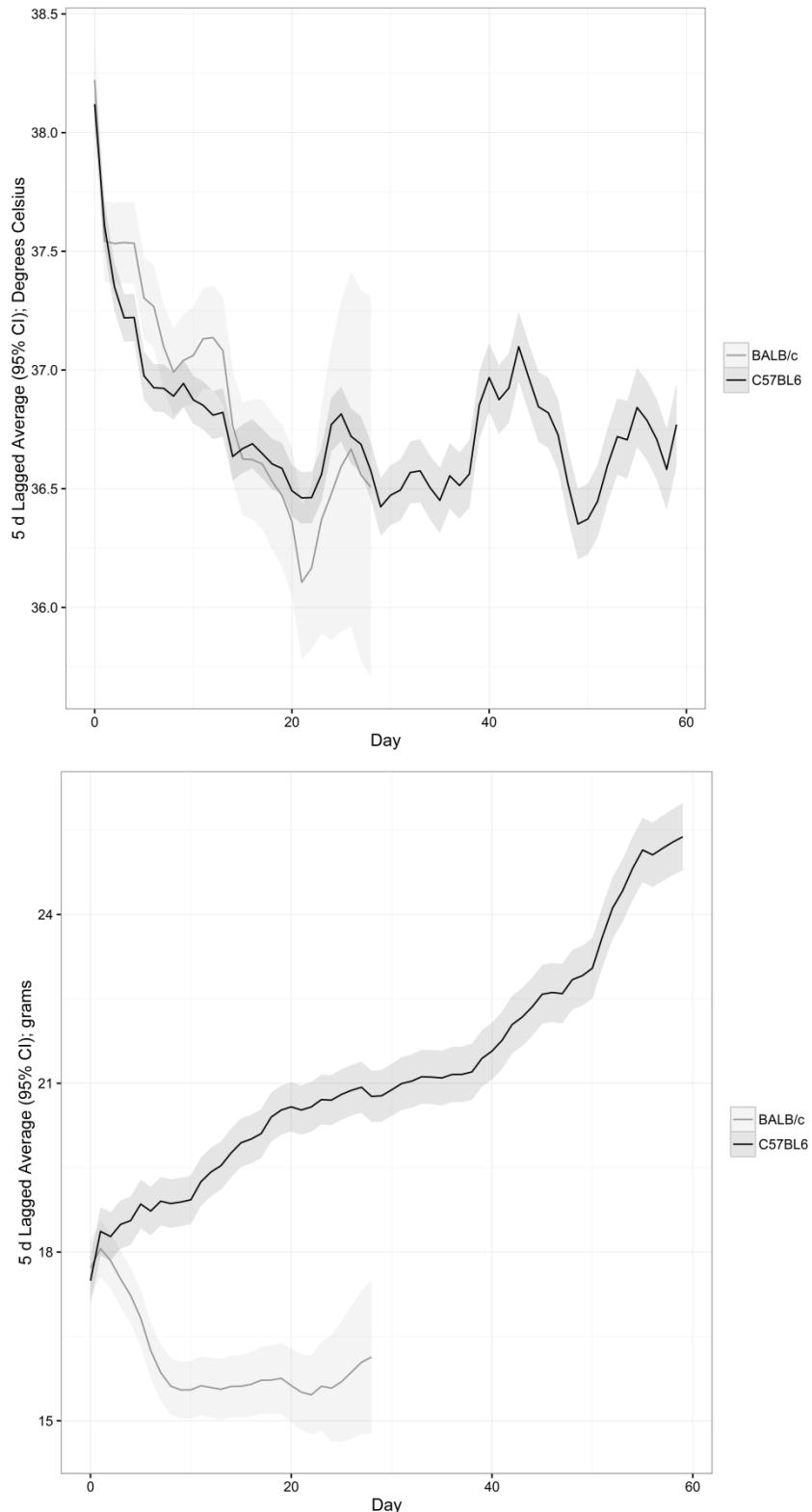


Figure 7

UNCLASSIFIED

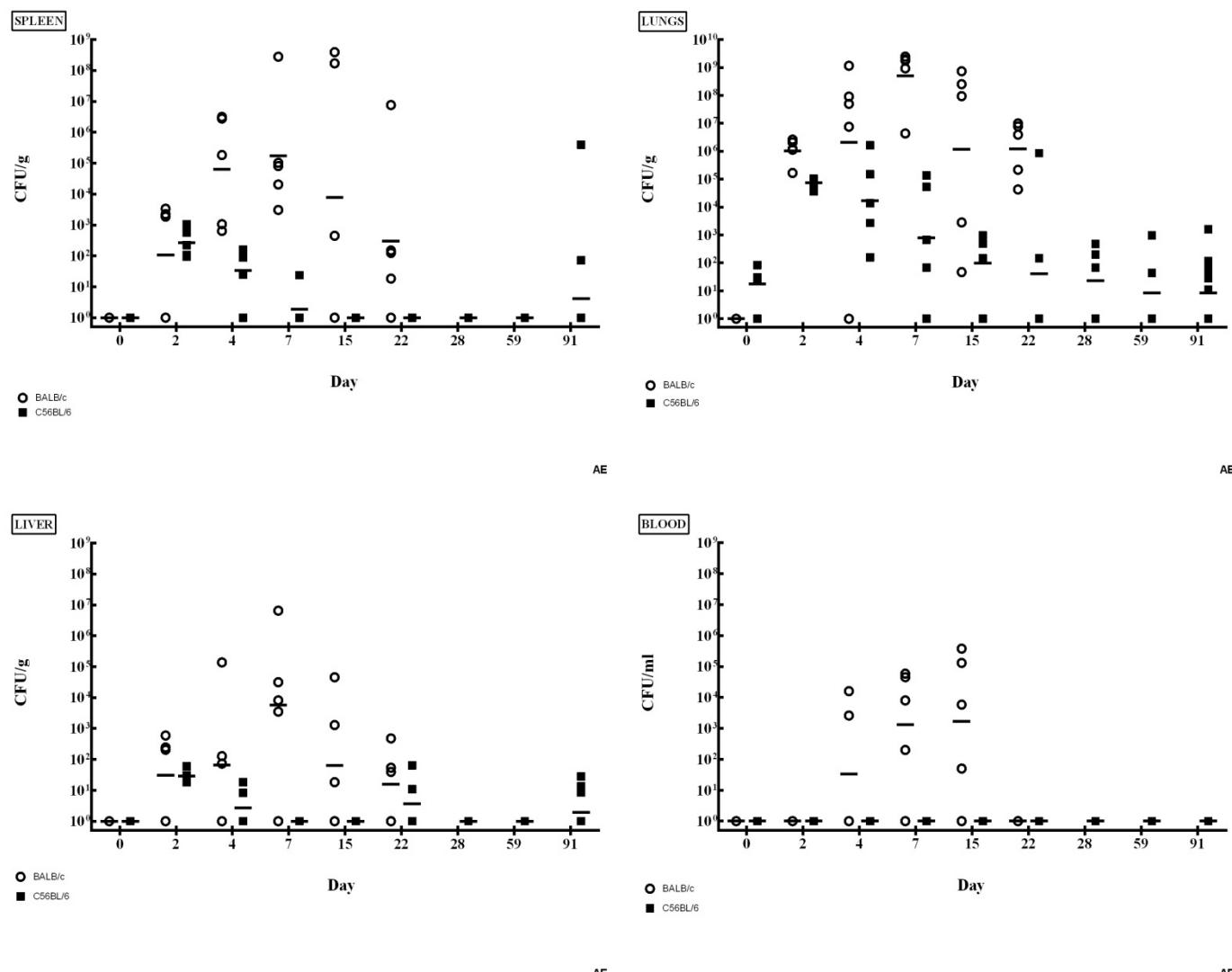


Figure 8

UNCLASSIFIED

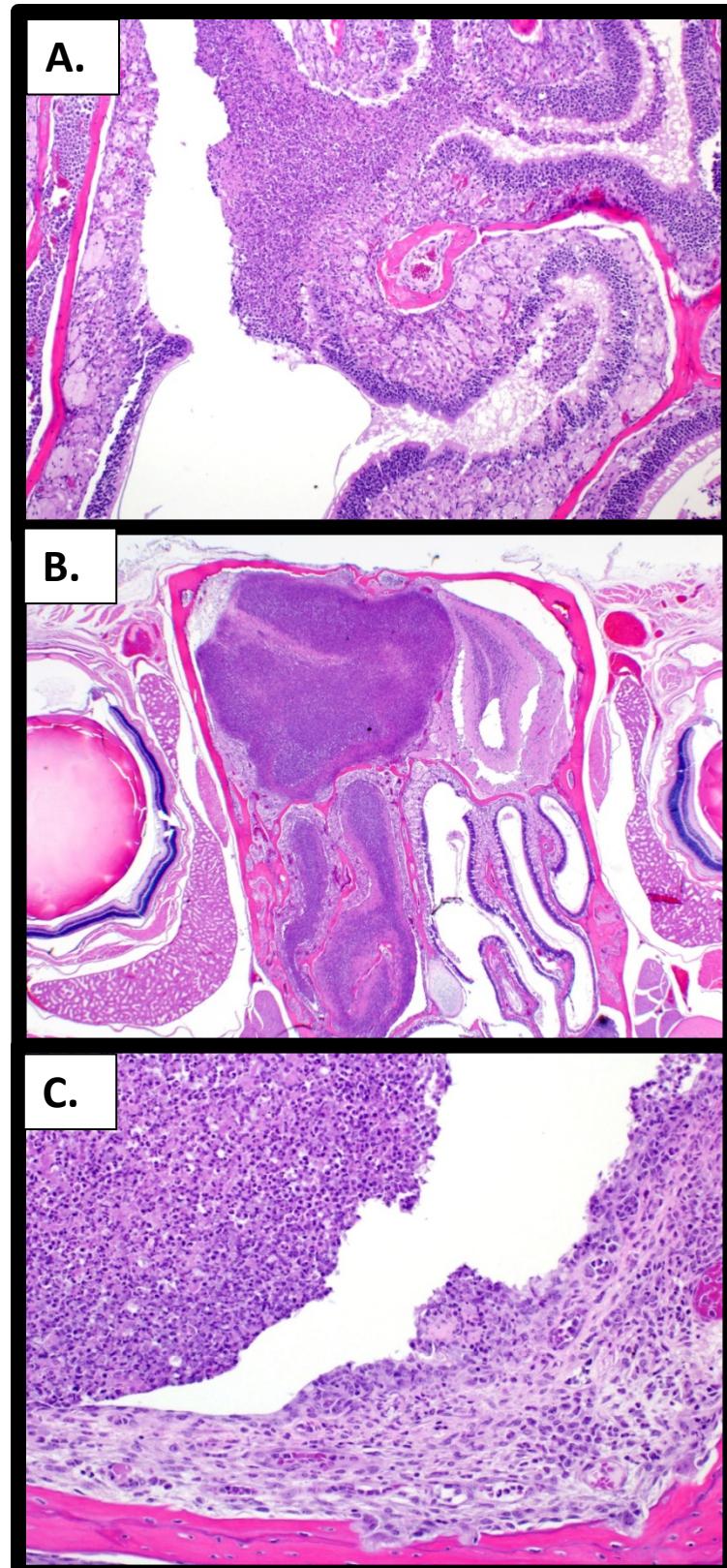


Figure 9

UNCLASSIFIED

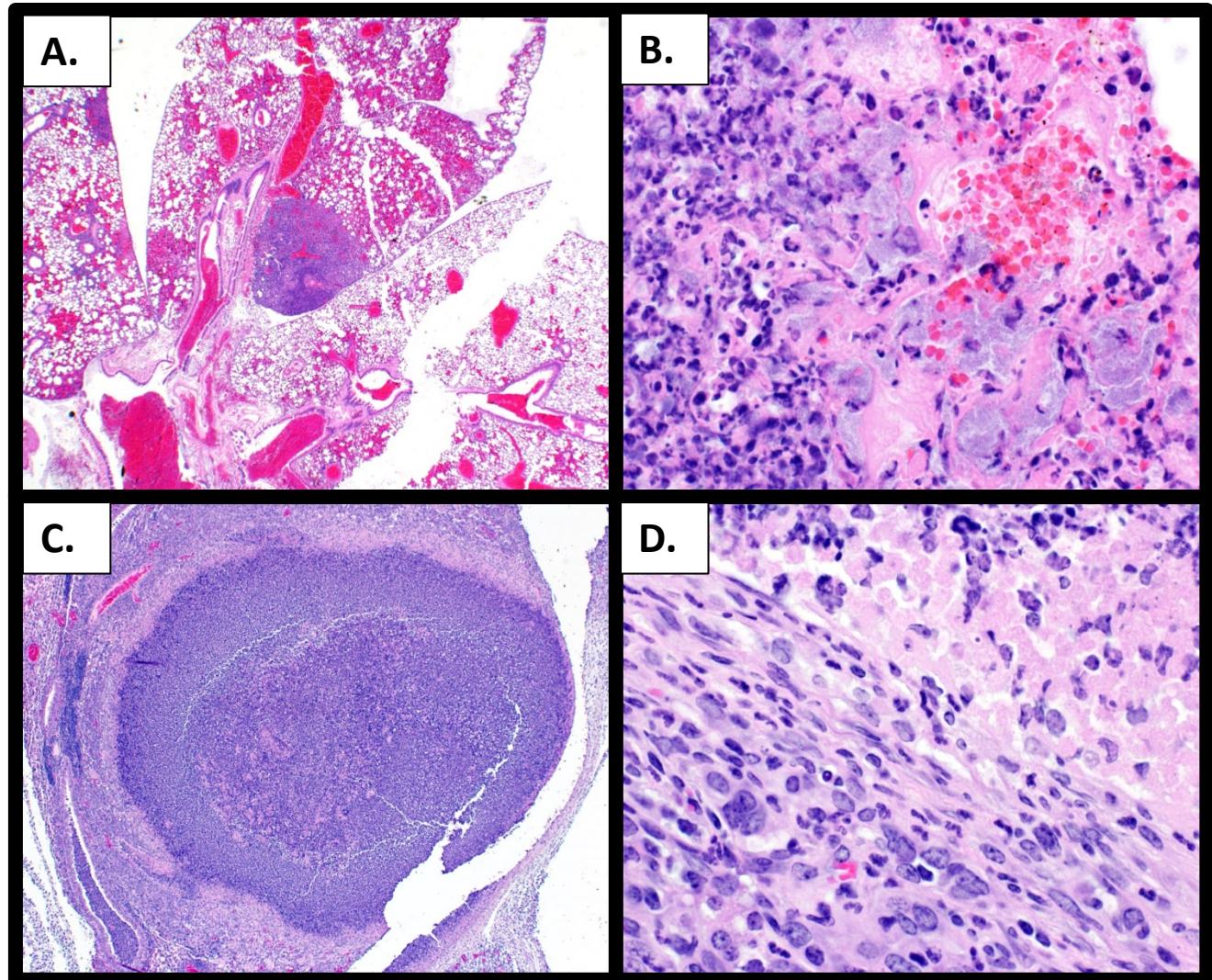


Figure 10

UNCLASSIFIED

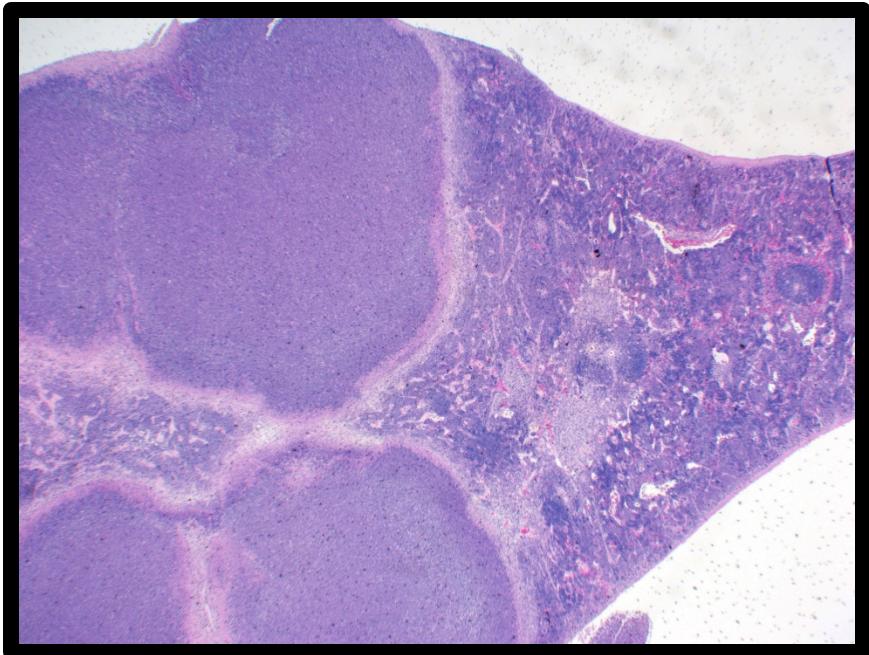


Figure 11

UNCLASSIFIED

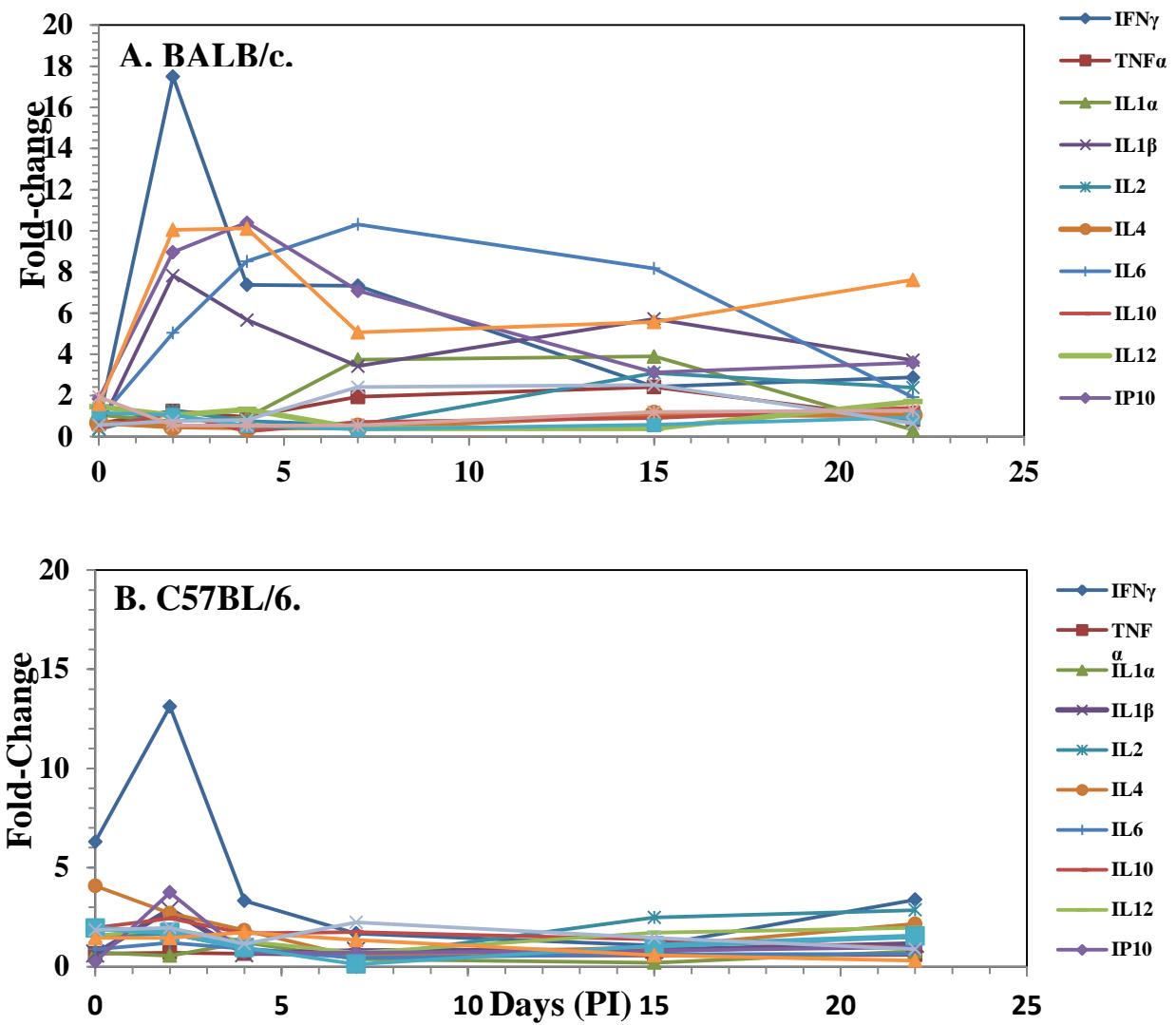


Figure 12-cytokine panel-sera after exposure to aerosolized bacteria-through day 22

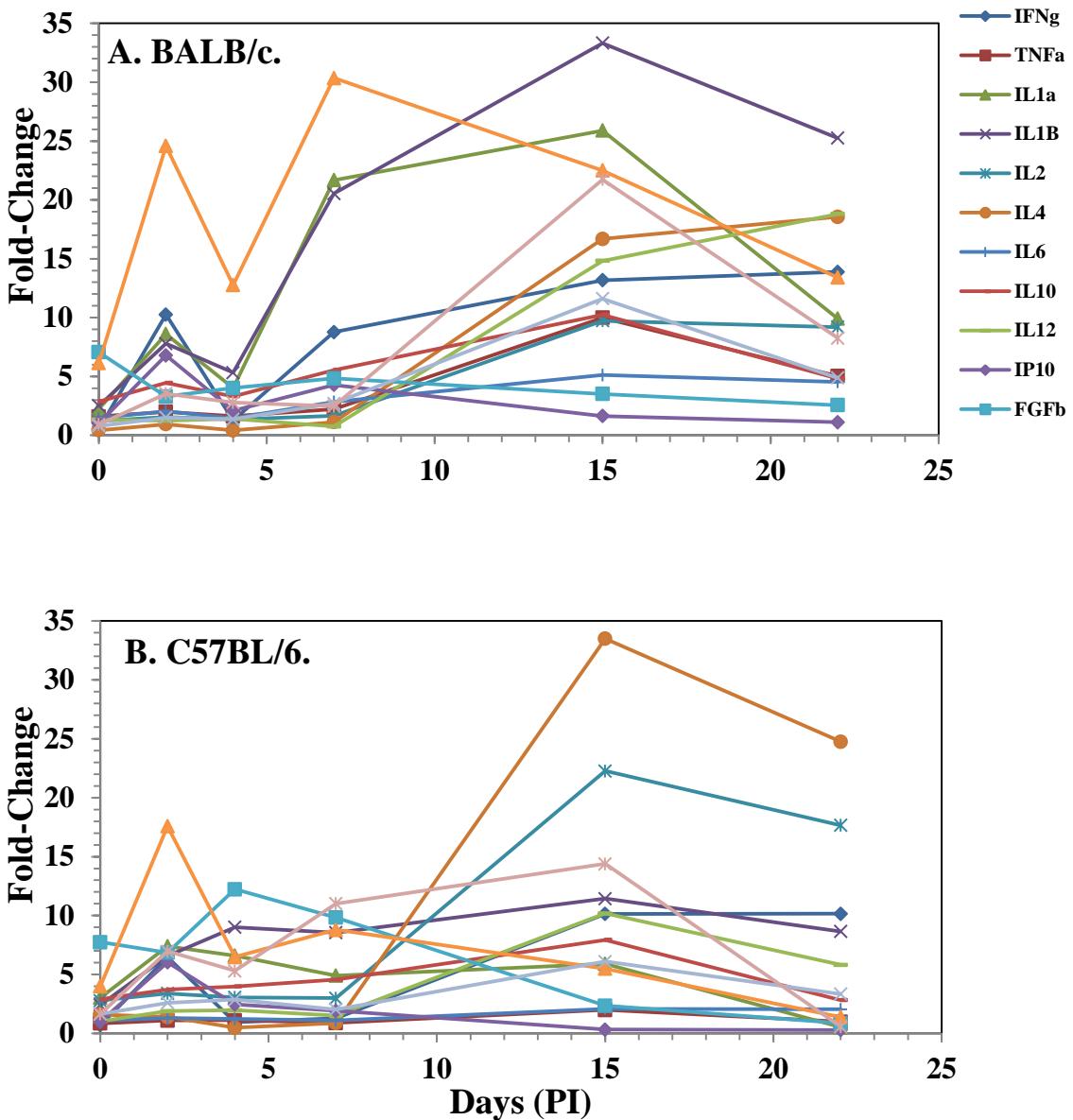


Figure 13-cytokine panel spleen extract after expose to aerosolized bacteria

UNCLASSIFIED

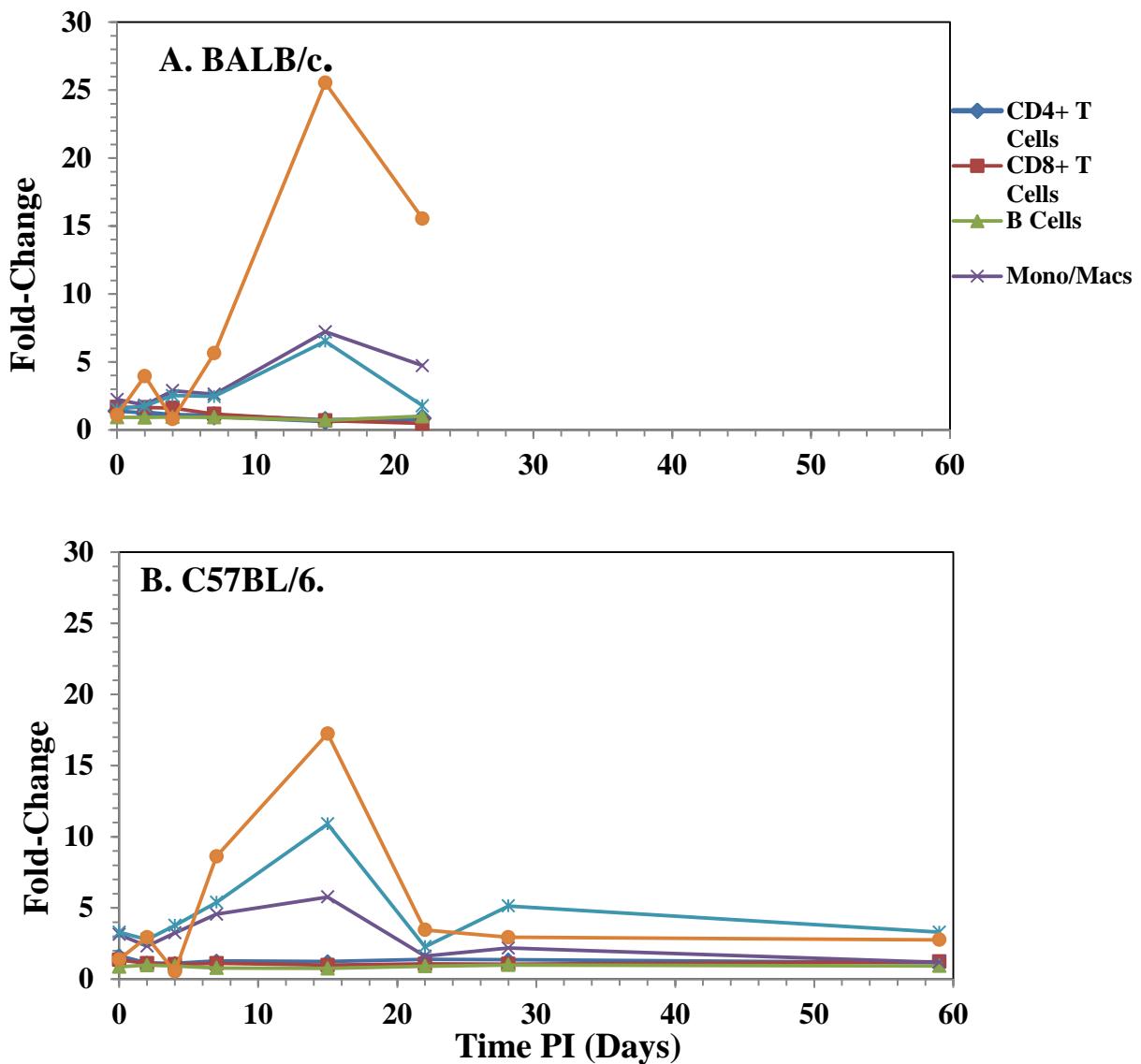
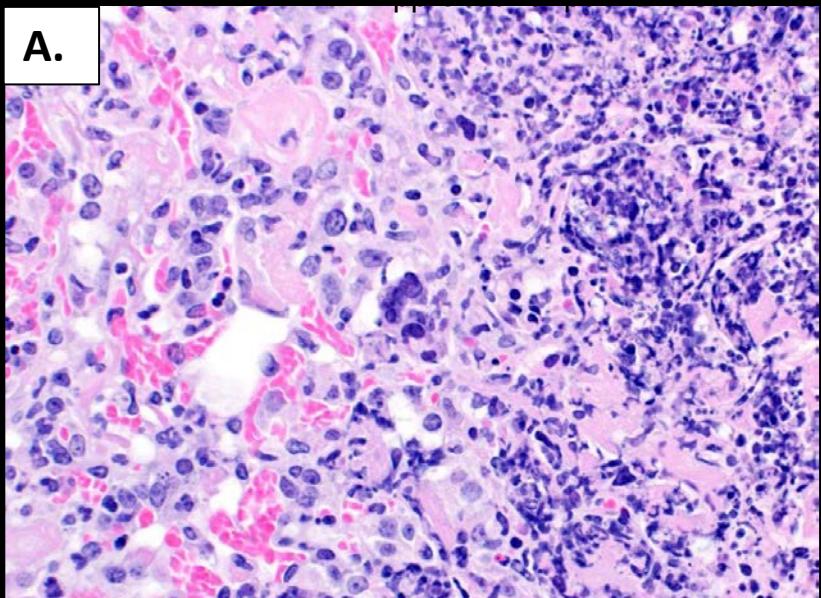
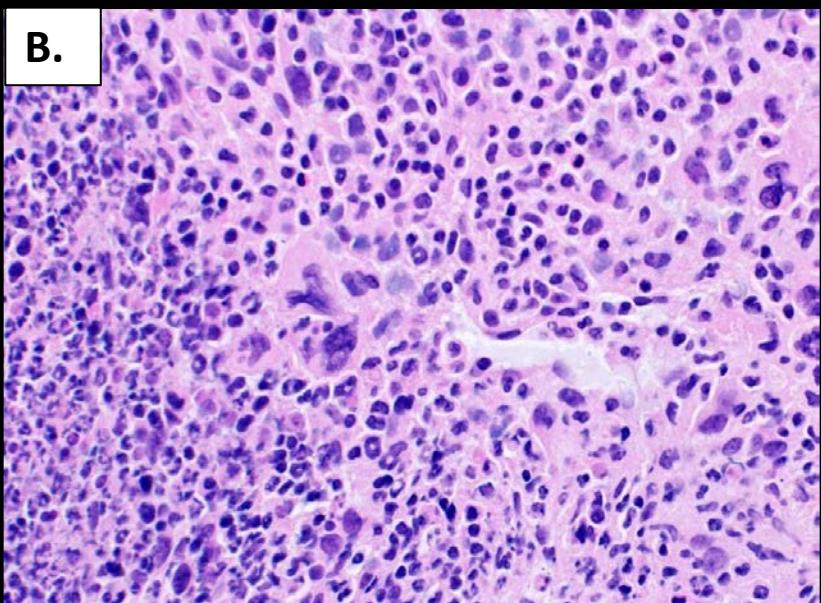


Figure 14-cell distribution spleen extract after expose to aerosolized bacteria

A.



B.



C.

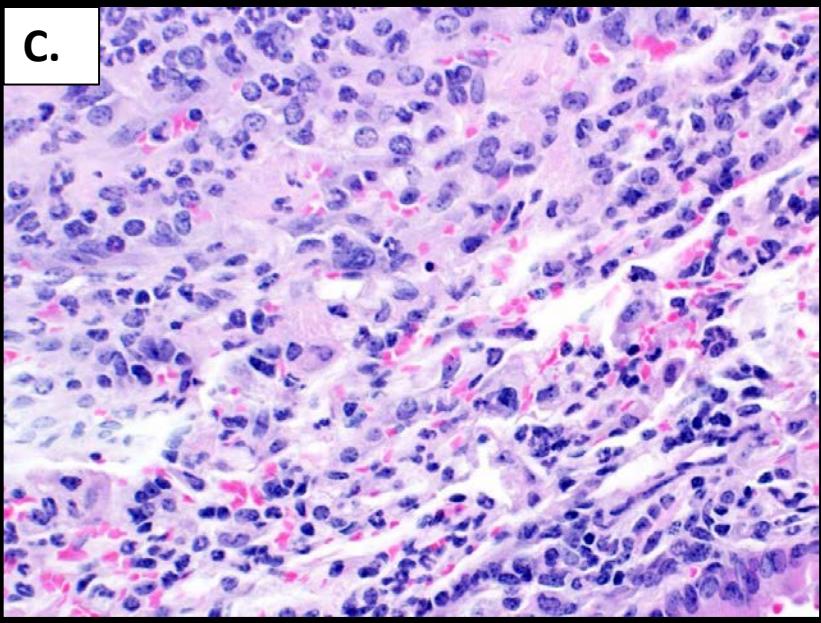


Figure 15-MNG

UNCLASSIFIED

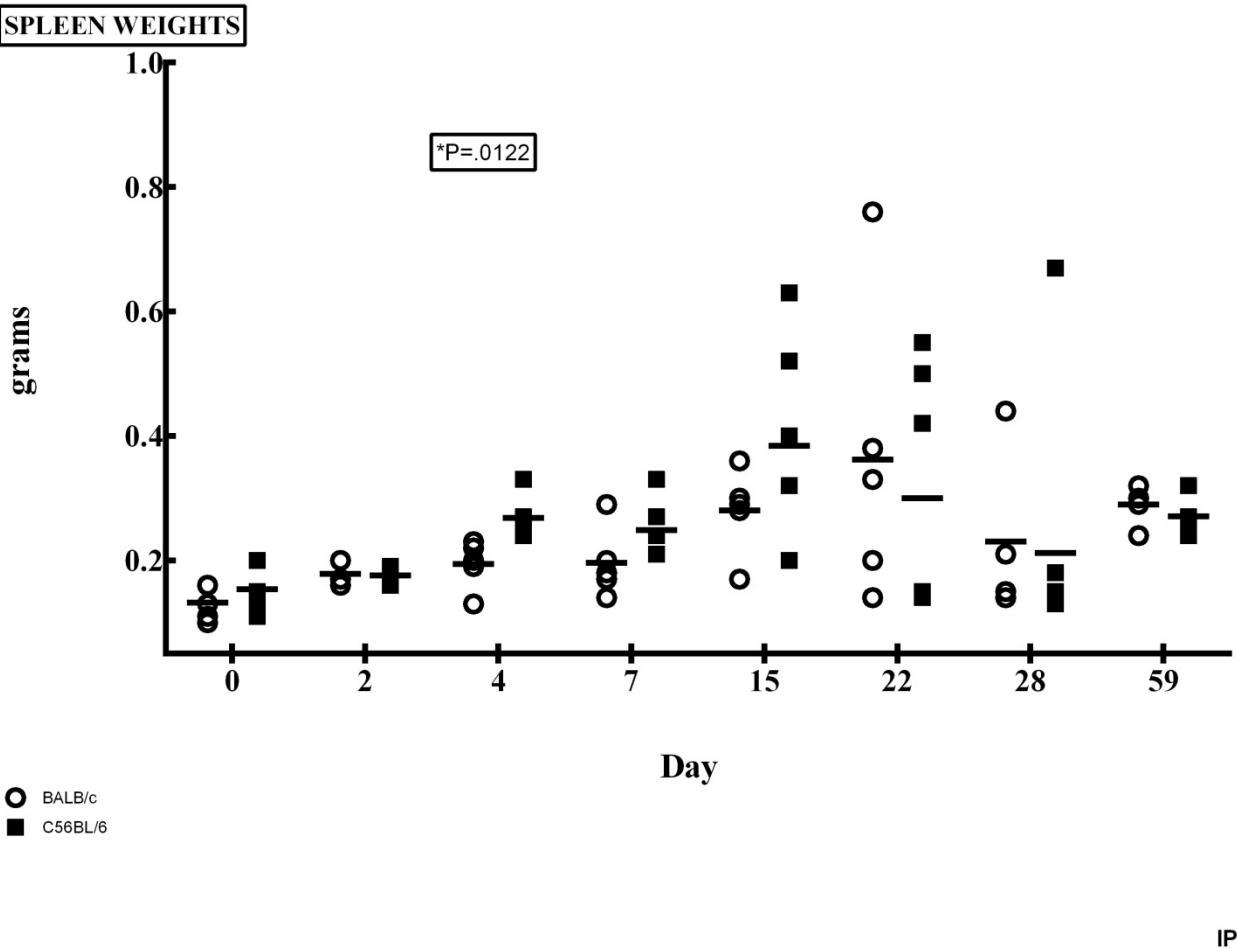
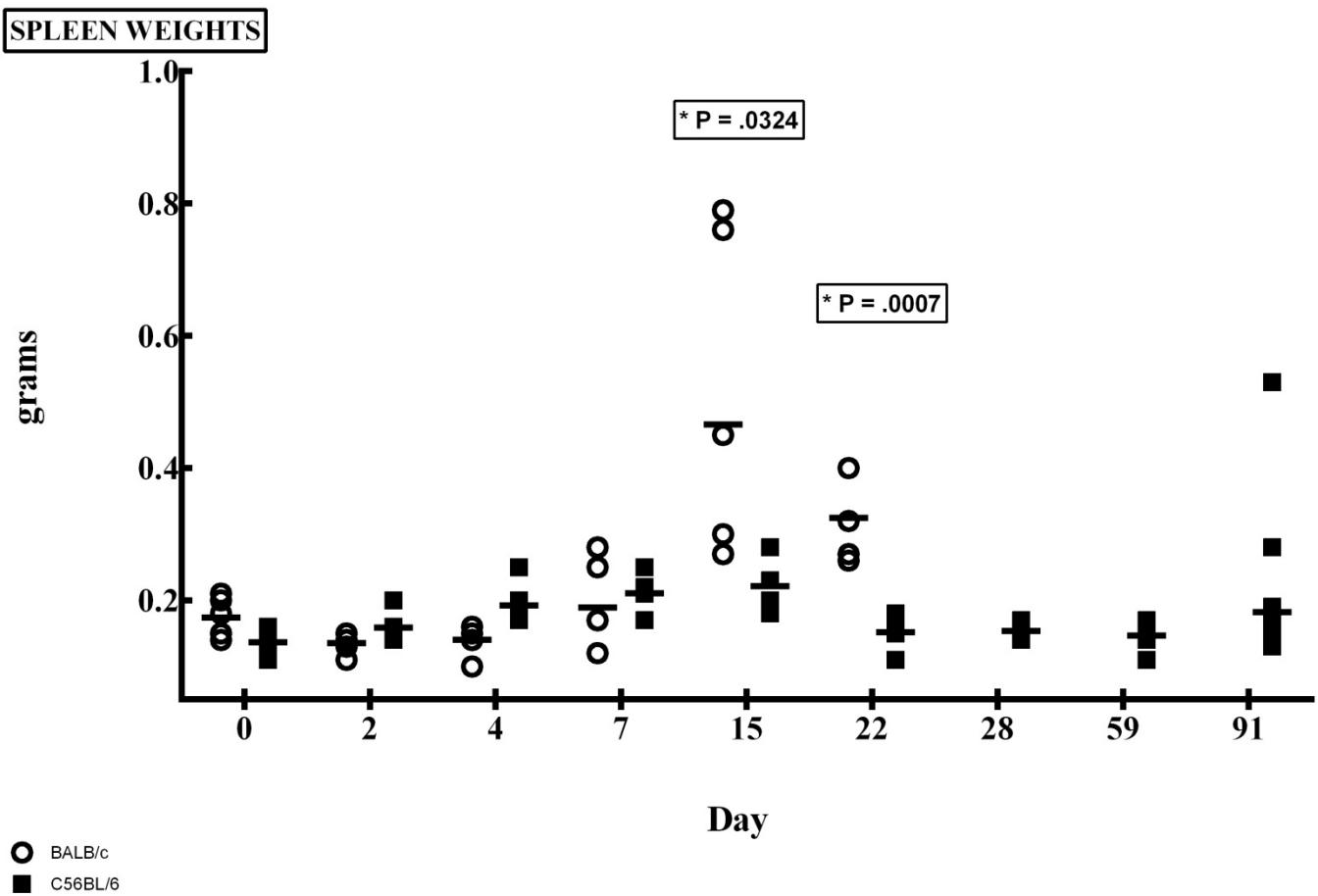


Figure S1-spleen weights after IP infection

UNCLASSIFIED



AE

Figure S2-spleen weights  
after exposure to aerosolized  
bacteria

UNCLASSIFIED

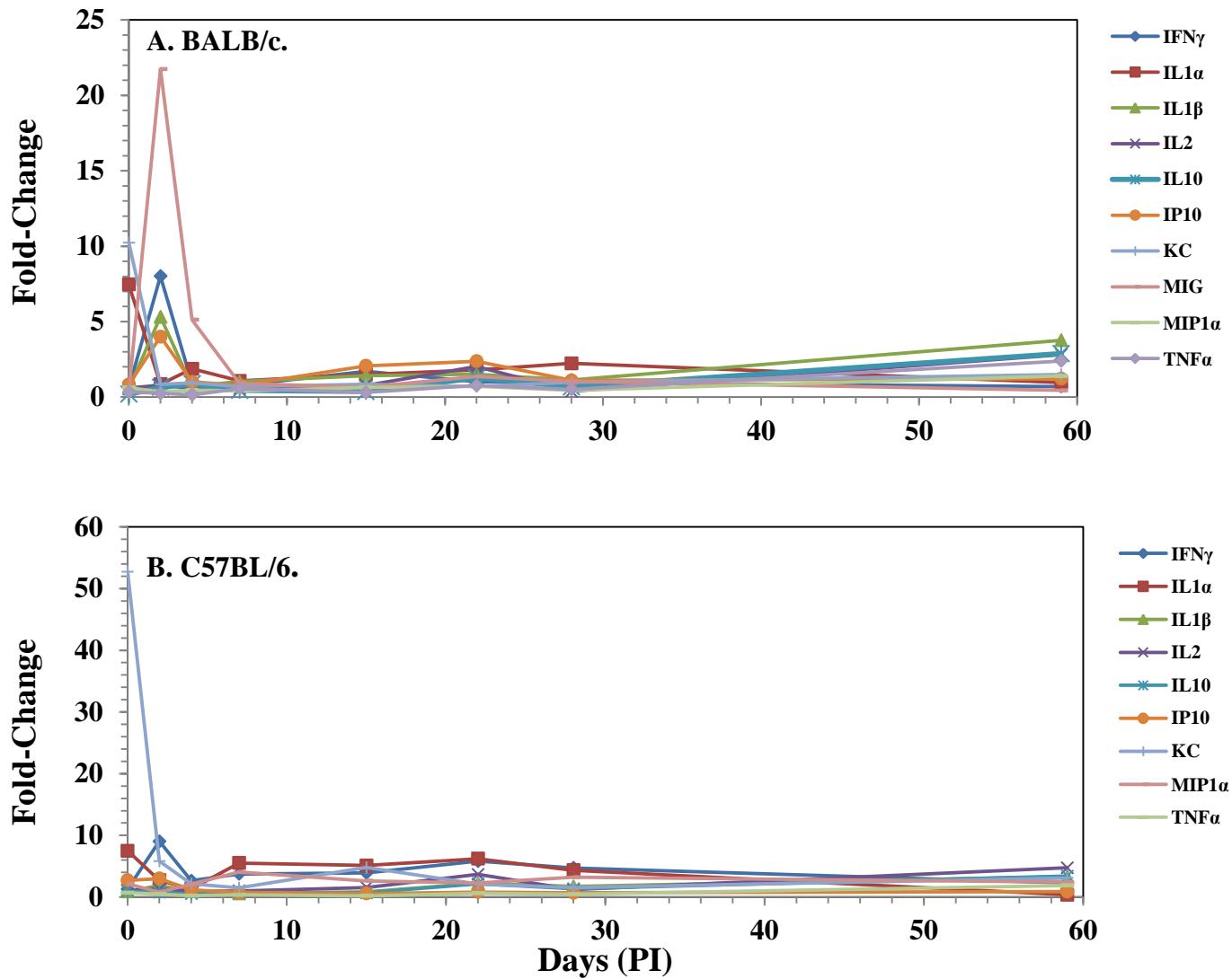


Table S3- cytokine panel sera  
after IP injections

UNCLASSIFIED

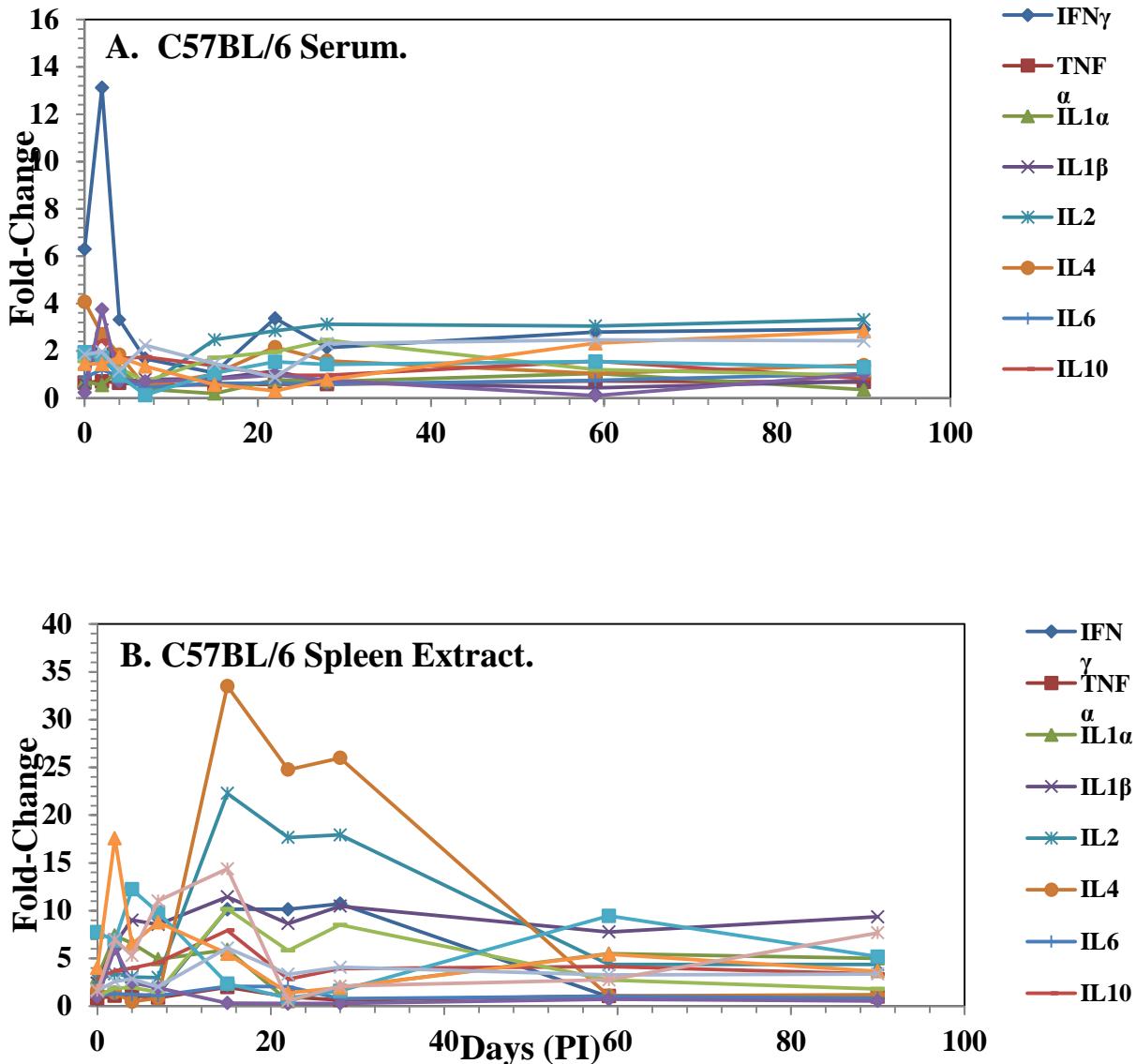


Figure s4 Cytokine Panel in both sera and spleen extract in C57BL/6 mice exposed to aerosolized bacteria through day 90

UNCLASSIFIED

**Table S1. Cellular changes in spleen composition in BALB/c and C57BL/6 mice after IP challenge with *B. pseudomallei* K96243.**

Mouse Strain	Cell type	Normal, naïve mice <sup>b</sup>	% Cell Type <sup>a</sup>							
			0 <sup>c,d</sup>	2	4	7	15	22	28	59
<b>A. BALB/c.</b>										
	CD4+ T Cells	23.6(0.60)	24.5(4.28)	21.70(4.7)	18.4(0.80)	27.2(1.88)	13.4(3.43)	19.5(4.71)	24.2(4.25)	23.9(1.29)
	CD8+ T Cells	10.0(0.39)	10.5(1.97)	13.1(0.44)	10.8(0.69)	15.4(0.95)§	8.07(2.04)	12.0(2.55)	10.0(1.92)	13.1(1.30)†
	B Cells	51.1(2.03)	50.0(0.82)	57.6(1.52)†	49.8(1.81)	40.6(0.89)	31.5(5.69)	24.8(6.52)	48.2(0.63)	54.6(1.70)
	Monocyte/Macrophages	4.61(0.53)	9.10(4.65)	4.22(0.24)	13.6(1.67)§	13.8(2.57)§	38.4(8.70)§	39.6(13.9)†	8.73(4.52)	50.1(4.50)§
	NK Cells	4.55(0.58)	12.8(3.39)†	6.85(0.60)¶	21.6(1.79)§	19.2(1.93)§	34.6(9.46)¶	28.1(7.00)¶	9.71(2.78)	12.9(1.68)§
	Granulocytes	1.01(0.16)	4.88(3.77)	2.99(0.21)§	4.56(1.61)†	6.79(1.80)¶	36.2(7.96)§	36.9(13.9)†	3.89(3.36)	6.46(0.66)¶
<b>B. C57BL/6.</b>										
		0	2	4	7	15	22	28	59	
	CD4+ T Cells	16.2(0.64)	20.0(2.41)	12.7(0.66)	16.4(0.40)	23.8(1.67)§	17.3(1.81)	16.2(2.39)	19.7(2.40)	16.9(0.85)
	CD8+ T Cells	10.8(0.35)	14.4(1.25)¶	10.1(0.41)	10.8(0.50)	16.5(1.42)§	12.9(2.96)	14.6(2.44)	13.9(1.12)¶	11.8(0.31)†
	B Cells	65.1(0.55)	52.0(4.86)	67.6(0.75)¶	52.6(3.19)	48.6(1.61)	42.4(3.34)	38.7(5.99)	50.1(4.96)	59.2(1.49)
	Monocyte/Macrophages	2.81(0.30)	6.18(2.70)	3.51(0.30)	16.2(4.59)†	8.78(1.97)¶	23.1(4.56)§	29.2(6.93)§	5.62(2.64)	47.5(3.52)§
	NK Cells	2.34(0.24)	9.85(2.54)¶	6.78(0.49)§	17.8(2.09)§	13.6(0.76)§	19.2(1.84)§	13.4(2.57)§	7.53(2.66)	14.3(1.98)§
	Granulocytes	0.58(0.90)	2.17(1.40)	1.48(0.22)§	10.2(4.59)†	3.03(1.18)†	17.2(4.45)§	22.5(7.79)¶	1.52(1.18)	7.22(0.57)§

<sup>a</sup> % Cell type were reported as geometric means with the geometric standard error of the means.

<sup>b</sup> N was 10 for normal naïve BALB/c mice, and N was 4 for normal naïve C57BL/6 mice.

<sup>c</sup> N was equal to 5 for each mouse strain at each time point post-infection (PI).

<sup>d</sup> For significant levels compared to the naïve, control mice: † P<0.05; ¶ P<0.01; §P≤0.001.

Table S2. Cytokines/chemokines in serum from BALB/c and C57BL/6 mice after IP challenge with *B. pseudomallei* K96243.

Cytokine/ Chemokine	Mouse Strain <sup>b</sup>	Naïve <sup>c</sup> , Control <sup>d</sup>	Amount Cytokine/Chemokine Expressed (pg/ml) <sup>a</sup>							
			Time (Days PI)							
			0	2	4	7	15	22	28	59
IFN- $\gamma$	BALB/c C57BL/6	21.0(1.13) 10.8(1.47)	12.9(1.27) 13.9(1.21)	168.3(1.11)§ 97.6(1.11)¶	18.6(1.49) 28.6(1.49)	16.2(1.03) 40.3(1.16)†	35.8(1.33) 42.2(1.33)†	21.5(1.42) 62.7(1.09)†	20.3(1.42) 51.0(1.20)†	14.6(1.05) 24.8(1.28)
TNF- $\alpha$	BALB/c C57BL/6	23.0(1.01) 24.0(1.03)	7.7(1.67) 16.6(1.22)	5.7(1.14) 11.3(1.40)	3.3(1.65) 5.3(1.87)	12.9(1.78) 8.6(1.99)	7.1(1.33) 4.6(1.17)	17.5(1.12) 15.0(1.03)	11.7(1.27) 10.7(1.09)	55.0(1.30)† 44.8(1.11)¶
IL-1 $\alpha$	BALB/c C57BL/6	25.9(1.01) 30.9(1.18)	196.2(1.16)§ 235.3(1.15)§	22.4(1.65) 85.3(1.33)†	49.1(1.52) 41.2(1.30)	27.8(1.25) 172.9(1.21)§	39.4(1.95) 160.9(1.11)§	47.1(2.07) 194.7(1.47)¶	58.8(1.64) 136.5(1.27)¶	25.3(1.12) 11.0(2.03)
IL-1 $\beta$	BALB/c C57BL/6	22.2(1.01) 21.8(1.01)	11.8(1.69) 19.7(1.44)	113.9(1.12)§ 40.1(1.36)	14.4(1.31) 19.9(1.45)	21.9(1.01) 12.4(1.42)	30.5(1.41) 18.1(1.17)	32.3(1.25) 47.7(1.23)†	24.2(1.24) 36.8(1.14)†	80.5(1.43)† 70.3(1.55)
IL-2	BALB/c C57BL/6	5.8(1.07) 4.0(1.04)	3.5(1.04) 4.4(1.07)	4.6(1.04) 5.2(1.03)	3.3(1.01) 3.7(1.07)	3.2(1.03) 4.0(1.06)	4.5(1.27) 6.2(1.37)	11.8(1.21)† 14.7(1.07)§	2.2(1.15) 4.8(1.28)	16.3(1.02)§ 19.0(1.03)§
IL-5	BALB/c C57BL/6	19.8(1.02) 15.8(1.27)	36.7(1.21)† 96.5(1.19)¶	10.7(1.34) 37.2(1.20)†	10.2(1.55) 19.7(1.02)	19.7(1.02) 19.0(1.18)	22.5(1.10) 19.3(1.02)	12.6(1.41) 8.3(1.50)	10.3(1.33) 13.8(1.35)	13.8(1.19) 21.3(1.39)
IL-6	BALB/c C57BL/6	24.7(1.05) 29.1(1.01)	49.6(1.29) 60.6(1.36)	34.3(1.20) 18.2(1.18)	8.5(1.50) 22.2(1.93)	7.1(2.34) 12.1(1.53)	40.3(1.46) 24.5(1.26)	52.2(1.46) 26.0(1.24)	16.3(1.97) 18.7(1.35)	16.4(1.02) 17.9(1.17)
IL-10	BALB/c C57BL/6	50.8(1.16) 43.5(1.01)	9.5(1.70) 41.3(1.34)	32.6(1.38) 33.1(1.19)	44.0(1.01) 22.6(1.44)	22.5(1.95) 31.9(1.33)	18.5(2.34) 29.8(1.25)	64.3(1.24) 93.9(1.25)	33.8(1.32) 58.1(1.26)	146.1(1.13)§ 147.9(1.07)§
FGFb	BALB/c C57BL/6	216.8(1.12) 262.4(1.19)	389.8(1.28) 419.9(1.12)	288(1.05)† 516.9(1.05)†	335.2(1.11)† 464.2(1.14)†	188.6(1.07) 527.4(1.14)†	194.5(1.05) 424.2(1.11)	226(1.19) 564.9(1.07)†	216.6(1.06) 414.5(1.12)	176.7(1.30) 318.0(1.31)
IP10	BALB/c C57BL/6	23.3(1.21) 26.1(1.30)	19.3(1.06) 70.9(1.45)	93.3(1.16)§ 78.0(1.43)†	23.5(1.22) 29.8(1.34)	18.1(1.09) 19.2(1.02)	48.1(1.47) 14.6(1.19)	55.3(1.36)† 21.1(1.20)	25.7(1.50) 17.9(1.05)	28.2(1.57) 22.8(1.28)
KC	BALB/c C57BL/6	260.7(1.40) 73.0(1.06)	2668(1.15)§ 3848(1.08)§	218.4(1.70) 424.4(1.68)†	243.2(1.94) 155.5(1.39)	182.0(2.15) 108.5(1.33)	219.7(1.39) 350.1(1.87)	182.6(1.50) 154.3(1.65)	255.0(1.80) 111.3(2.21)	386.7(1.43) 225.4(1.38)†
MCP-1	BALB/c C57BL/6	21.2(1.01) 20.4(1.02)	43.4(1.53) 247.5(1.29)§	37.2(1.16)† 118.0(1.54)†	20.7(1.01) 21.4(1.03)	24.9(1.14) 19.7(1.21)	19.3(1.08) 21.5(1.05)	20.0(1.15) 28.7(1.20)	11.7(1.06) 21.6(1.32)	19.3(1.63) 25.9(1.48)
MIG	BALB/c C57BL/6	184.4(1.16) 9.1(1.14)	70.3(1.47) 493.7(1.33)§	4009(1.11)§ 2107(1.13)§	943.7(1.06)§ 491.8(1.27)§	167.2(1.14) 90.7(1.42)¶	120.2(2.13) 183.4(1.39)§	251.8(1.36) 136.9(1.23)§	192(1.50) 98.0(1.33)§	81.2(1.54) 77.3(1.15)§
MIP-1 $\alpha$	BALB/c C57BL/6	38.4(1.01) 18.3(1.55)	23.8(1.35) 39.1(1.09)	13.5(1.08) 14.8(1.29)	17.8(1.30) 38.4(1.31)	15.7(1.31) 73.9(1.57)	24.5(1.99) 48.1(1.53)	27.5(1.07) 41.6(1.10)	17.2(1.28) 58.6(1.26)	53.5(1.16) 44.2(1.18)
VEGF	BALB/c C57BL/6	12.2(1.31) 2.6(2.32)	5.4(1.99) 2.0(1.34)	4.1(1.45) 2.1(1.63)	7.3(1.52) 3.6(1.68)	4.1(1.71) 3.8(1.69)	9.0(1.52) 6.4(1.21)	15.3(1.26) 9.1(1.15)	7.9(1.57) 3.6(1.56)	13.8(1.41) 8.5(1.19)

<sup>a</sup> Cytokine/chemokines were reported as geometric means with the geometric standard error of the means.<sup>b</sup> N was equal to 5 for each mouse strain at each time point after infection (PI).<sup>c</sup> For geometric means for the naïve mice, n was equal to 10 for BALB/c mice, and n was equal to 4 for C57BL/6 mice.<sup>d</sup> For significant levels compared to the naïve, control mice: †P<0.05; ¶P<0.01; §P≤0.001.

Table S3. Cytokines/chemokines in spleen extracts from BALB/c and C57BL/6 mice after IP challenge with *B. pseudomallei* K96243.

Cytokine/ Chemokine	Mouse Strain <sup>b</sup>	Naïve <sup>c</sup> , Control	Amount Cytokine/Chemokine Expressed (pg/ml) <sup>a</sup>							
			0 <sup>d</sup>	2	4	7	15	22	28	59
IFN- $\gamma$	BALB/c	20.8(1.08)	23.0(1.14)	171.4(1.16)§	24.0(1.11)	27.9(1.06)†	65.6((1.48)†	45.7(1.39)	24.3(1.50)	26.7(1.26)
	C57BL/6	16.5(1.03)	100.3(1.35)¶	79.8(1.11)§	19.6(1.33)	38.6(1.24)†	30.2(1.07)§	37.1(1.25)†	15.7(1.02)	19.7(1.230)
TNF- $\alpha$	BALB/c	12.6(1.17)	16.3(1.05)	33.2(1.06)§	17.1(1.05)	16.9(1.08)	36.5(1.12)§	42(1.55)†	3.2(2.58)	43.1(1.01)§
	C57BL/6	23.3(23.3)	30.3(1.19)	24.1(1.10)	11.7(1.07)	21.0(1.14)	28.4(1.06)†	36.9(1.41)	3.6(1.62)	43.2(1.01)§
IL-1 $\alpha$	BALB/c	75.8(1.10)	356.8(1.09)§	1220(1.14)§	559.2(1.09)§	568.1(1.19)§	1029(1.27)§	418.8(1.27)§	325.8(1.15)§	148.5(1.12)†
	C57BL/6	45.9(1.19)	1237(1.25)§	934.2(1.10)§	281(1.13)§	547.4(1.17)§	632.4(1.25)§	677.8(1.28)§	371.9(1.34)§	159.0(1.17)†
IL-1 $\beta$	BALB/c	38.9(1.23)	256.8(1.06)§	407.5(1.07)§	252.1(1.14)§	417(1.33)§	1898(1.80)¶	1030(1.79)¶	502.5(1.69)¶	102.8(1.45)
	C57BL/6	21.1(1.10)	672.7(1.10)§	162(1.10)§	101.3(1.28)¶	330.7(1.28)§	437.2(1.40)§	846.5(1.67)¶	287.4(1.51)¶	87.5(1.41)†
IL-2	BALB/c	7.3(1.15)	4.6(1.04)	7.3(1.02)	4.8(1.03)	5.3(1.05)	14.8(1.03)¶	12.7(1.24)	4.3(1.26)	29.1(1.09)§
	C57BL/6	3.3(1.08)	6.9(1.08)§	6.6(1.05)§	4.3(1.04)†	7.6(1.08)§	14.0(1.02)§	13.7(1.20)§	5.5(1.28)	33.0(1.07)§
IL-5	BALB/c	24.7(1.10)	19.6(1.06)	42.3(1.14)†	10.8(1.11)	14.0(1.45)	40.1(1.12)†	24.5(1.30)	14.2(1.38)	14.4(1.43)
	C57BL/6	20.1(1.04)	81.7(1.23)¶	45.3(1.22)†	4.8(1.43)	34.7(1.24)	35.2(1.11)¶	34.0(1.23)	19.2(1.04)	5.7(1.33)
IL-6	BALB/c	22.4(1.10)	23.1(1.09)	48.1(1.08)§	27.3(1.07)	22.5(1.22)	43.6(1.10)§	33.8(1.20)	11.3(2.22)	16.5(1.02)
	C57BL/6	29.5(1.01)	60.6(1.35)	35.3(1.09)	9.7(1.75)	57.5(1.24)§	32.4(1.08)	41.8(1.22)	8.2(2.16)	15.8(1.04)
IL-10	BALB/c	26.2(1.07)	31.9(1.37)	35.2(1.07)†	43.4(1.01)§	23.4(1.48)	62.2(1.10)§	121.7(1.16)§	30.1(1.44)	235.0(1.28)§
	C57BL/6	35.6(1.14)	41.1(1.21)	15.5(1.74)	44.0(1.01)	63.9(2.41)	20.7(1.28)	146.0(1.16)§	43.8(0.204)	183.3(1.18)§
IL-12	BALB/c	19.1(1.23)	63.8(1.03)§	95.1(1.09)§	70.5(1.04)§	93.7(1.10)§	44.3(1.07)¶	65.1(1.23)¶	37.0(1.13)†	61.3(1.15)§
	C57BL/6	28.5(1.19)	111.2(1.26)¶	76.6(1.14)¶	39.4(1.23)	97.2(1.13)¶	89.6(1.12)¶	111.0(1.07)¶	74.9(1.05)¶	77.0(1.07)¶
FGFb	BALB/c	489.4(1.21)	2908(1.13)§	2175(1.02)§	2484(1.07)§	1491(1.05)§	4466(1.06)§	5571(1.25)§	4298(1.28)§	1523(1.15)§
	C57BL/6	313.8(1.02)	2074(1.05)§	1860(1.11)§	1592(1.07)§	1646(1.10)§	2475(1.23)§	4335(1.33)§	2811(1.16)§	949.2(1.09)§
IP10	BALB/c	19.5(1.05)	103.8(1.08)§	373.3(1.18)§	86.6(1.12)§	86.2(1.09)§	61.4(1.11)§	69.7(1.11)§	26.4(1.53)	94.9(1.52)†
	C57BL/6	24.8(1.33)	1221(1.25)§	394.4(1.23)§	82.6(1.21)†	220.1(1.21)¶	70.6(1.15)†	107.3(1.04)†	52.9(1.16)	127.2(1.11)¶
KC	BALB/c	350.8(1.04)	1237(1.21)¶	713.8(1.04)§	535.4(1.07)§	598.9(1.20)†	619.6(1.23)†	666.8(1.23)†	349.5(1.22)	1331(1.14)§
	C57BL/6	206.5(1.07)	3320(1.12)§	622.1(1.08)§	442.4(1.10)§	266.7(1.40)	529.5(1.25)†	533.7(1.08)§	331.9(1.16)†	1216(1.15)§
MCP-1	BALB/c	18.2(1.12)	41.2(1.15)¶	68.5(1.18)§	16.1(1.16)	17.5(1.39)	34.0(1.11)¶	27.0(1.31)	20.6(1.01)	33.4(1.37)
	C57BL/6	13.3(1.08)	182.1(1.20)§	80.7(1.26)§	21.1(1.02)¶	30.7(1.37)	31.0(1.11)§	30.6(1.29)†	21.2(1.01)¶	18.1(1.36)
MIG	BALB/c	142.1(1.09)	1122(1.10)§	7612((1.14)§	2203(1.14)§	2713(1.07)§	1996(1.42)¶	1567(1.29)§	1184(1.58)¶	687.7(1.09)§
	C57BL/6	216(1.41)	3653(1.21)§	5032(1.12)¶	1223(1.25)¶	4024(1.33)§	984.8(1.08)†	1935(1.40)¶	1071(1.26)¶	634.9(1.14)†
MIP-1 $\alpha$	BALB/c	59.3(1.12)	108.9(1.06)§	289.2(1.07)§	164.21.06)§	140.3(1.10)§	129.2(1.08)§	93.2(1.18)	29.2(1.21)	145.1(1.14)§
	C57BL/6	26.4(1.23)	382.4(1.25)§	255.3(1.07)§	80.2(1.09)¶	177.9(1.09)¶	136.5(1.08)¶	128.3(1.12)¶	26.4(1.35)	129.8(1.12)¶
VEGF	BALB/c	13.5(1.05)	58.8(1.06)§	67.5(1.04)§	33.9(1.10)§	35.3(1.37)†	495.3(2.10)¶	363.5(3.03)†	40.2(2.58)	34.9(1.23)¶
	C57BL/6	4.6(1.07)	34(1.27)§	33.2(1.10)§	20.4(1.59)†	26.3(1.33)¶	118.5(1.61)¶	140.1(1.94)¶	54.2(1.93)†	20.1(1.47)†

<sup>a</sup> Cytokine/chemokines were reported as geometric means with the geometric standard error of the means.<sup>b</sup> N was equal to 5 for each mouse strain at each time point after infection (PI).<sup>c</sup> For geometric means for the naïve mice, n was equal to 10 for BALB/c mice, and n was equal to 4 for C57BL/6 mice.<sup>d</sup> For significant levels compared to the naïve, control mice: †P<0.05; ¶P<0.01; §P≤0.001.

UNCLASSIFIED

Table S4. Cell distribution of spleens from aerosol infected BALB/c or C57BL/6 mice with *B. pseudomallei* K96243.

Cell Type	Mouse Strain <sup>b</sup>	Naïve Control <sup>c</sup>	% Cell Distribution <sup>a</sup>							
			0 <sup>d</sup>	2	4	7	15	22	28	59
CD4+ T Cells	BALB/c	23.6 (0.60)	32.4(0.56)§	29.3(1.63)†	24.9(2.02)	24.1(1.30)	15.8(2.21)	19.9(1.28)	---	---
	C57BL/6	16.1(0.64)	26.4(1.39)§	18.1(1.44)	17.7(0.63)	20.5(1.39)†	19.8(1.10)†	22.2(0.98)¶	21.9(0.64)§	18.5(0.88)
CD8+ T Cells	BALB/c	10.0(0.38)	16.8(0.27)§	16.6(0.97)¶	16.1(1.43)†	11.7(0.66)	6.90(0.97)	8.0(0.40)	---	---
	C57BL/6	10.8(0.35)	14.5(0.68)¶	11.9(0.42)	11.1(0.45)	11.9(0.78)	10.5(0.75)	11.5(0.69)	11.3(0.40)	13.2(0.36)¶
B Cells	BALB/c	51.1(2.03)	47.4(0.67)	46.7(2.07)	48.3(3.39)	47.4(3.08)	36.0(2.89)	51.2(1.74)	---	---
	C57BL/6	65.1(0.55)	56.0(1.86)	63.2(1.88)	59.9(1.97)	50.6(1.32)	48.2(4.56)	58.9(0.75)	64.2(0.76)	60.4(0.57)
Monocytes/Macrophages	BALB/c	4.60(0.53)	10.3(0.45)§	8.40(0.40)§	13.3(1.25)§	12.1(0.83)§	33.3(5.95)§	21.8(3.09)¶	---	---
	C57BL/6	2.80(0.30)	8.80(0.27)§	6.50(1.22)†	9.10(0.62)§	12.8(2.11)¶	16.2(3.92)†	4.50(0.71)	6.10(0.63)¶	3.30(0.45)
NK Cells	BALB/c	4.60(0.58)	6.90(0.52)†	8.00(0.59)¶	11.5(1.37)¶	11.2(0.61)§	29.7(1.37)§	8.10(0.92)†	---	---
	C57BL/6	2.30(0.23)	7.70(0.51)§	6.50(1.12)†	8.80(0.60)§	12.6(0.85)§	25.5(1.62)§	5.30(0.55)¶	12.0(0.58)§	7.70(0.74)¶
Granulocytes	BALB/c	1.00(0.16)	1.10(0.10)	4.00(0.27)§	0.80(0.06)	5.70(1.12)†	25.8(5.21)¶	15.7(2.58)¶	---	---
	C57BL/6	0.60(0.09)	0.80(0.12)	1.70(0.30)†	0.30(0.04)	5.00(1.61)	10.0(2.91)†	2.00(0.34)†	1.70(0.52)	1.60(0.23)†

<sup>a</sup> % Cell distribution is reported as geometric means with the geometric standard error of the means.<sup>b</sup> N was equal to 5 for each mouse strain at each time point after infection (PI). Dash lines (---) represents no data because mice had expired.<sup>c</sup> For geometric means for the naïve mice, n was equal to 10 for BALB/c mice, and n was equal to 4 for C57BL/6 mice.<sup>d</sup> For significant levels compared to the naïve, control mice: †P<0.05; ¶ P<0.01; §P≤0.001.

Table S5. Cytokines/chemokines in serum from BALB/c and C57BL/6 mice after aerosol challenge with *B. pseudomallei* K96243.

Cytokine/ Chemokine	Mouse Strain <sup>b</sup>	Naïve <sup>c</sup> , Control	Amount Cytokine/Chemokine Expressed (pg/ml) <sup>a</sup>								
			Time (Days PI)								
			0 <sup>d</sup>	2	4	7	15	22	28	59	90
IFN- $\gamma$	BALB/c	21.2(1.13)	16.0(1.02)	371(1.50)¶	156.4(1.67)†	155.5(1.70)†	51.5(1.94)	61.0(1.57)	—	—	—
	C57BL/6	10.9(1.47)	68.6(1.06)†	143(1.25)¶	36.2(1.47)	18.2(1.14)	11.6(2.01)	36.8(1.15)†	23.3(1.31)	30.5(1.38)	31.8(1.38)
TNF- $\alpha$	BALB/c	23.4(1.03)	14.7(1.01)	29.3(1.54)	22.2(1.29)	45.2(1.49)	56.5(1.73)	19.0(1.15)	—	—	—
	C57BL/6	23.4(1.06)	15.4(1.09)	16.6(1.05)	15.2(1.08)	13.2(1.01)	13.3(1.01)	13.8(1.03)	13.8(1.09)	17.1(1.12)	15.9(1.04)
IL-1 $\alpha$	BALB/c	25.3(1.03)	26.6(1.02)	18.51(41)	23.7(1.97)	94.7(2.00)	98.5(2.90)	8.1(1.76)	—	—	—
	C57BL/6	30.7(1.18)	22.1(1.77)	17.0(1.39)	37.5(1.51)	11.7(1.46)	6.1(1.60)	23.7(1.23)	21.72(24)	32.1(1.86)	11.1(1.70)
IL-1 $\beta$	BALB/c	21.6(1.02)	8.0(1.42)	169.1(1.59)†	122.5(1.82)†	74(2.10)	123.6(1.83)†	80.1(1.50)†	—	—	—
	C57BL/6	21.2(1.05)	13.7(1.13)	60.9(1.37)†	14.1(1.46)	16.8(1.31)	17.5(1.21)	24.3(1.15)	14.2(1.18)	9.1(1.60)	15.1(1.41)
IL-2	BALB/c	6.5(1.04)	2.3(1.37)	8.3(1.56)	4.9(1.68)	3.6(1.35)	20.1(1.47)†	15.5(1.16)¶	—	—	—
	C57BL/6	4.0(1.04)	6.1(1.18)	6.7(1.12)¶	3.7(1.40)	1.9(1.05)	9.9(1.11)§	11.4(1.11)§	12.5(1.08)§	12.2(1.02)§	13.3(1.11)§
IL-4	BALB/c	43.1(1.03)	29.0(1.33)	21.0(1.26)	18.8(2.30)	19.3(1.37)	46.4(1.04)	44.7(1.04)	—	—	—
	C57BL/6	33.0(1.43)	134.3(1.14)†	88.9(1.37)	60.6(1.21)	16.0(1.67)	33.5(1.33)	71.2(1.16)	52.1(1.12)	34.5(1.82)	46.0(2.28)
IL-6	BALB/c	24.6(1.05)	20.2(1.12)	124.0(1.16)§	209.6(2.09)	253.8(2.43)	201.0(3.06)	46.9(1.29)	—	—	—
	C57BL/6	30.0(1.06)	26.1(1.14)	36.2(1.23)	27.1(1.37)	13.3(1.24)	18.6(1.23)	19.2(1.10)	17.9(1.06)	22.7(1.21)	31.1(1.51)
IL-10	BALB/c	51.1(1.16)	23.4(1.61)	57(1.35)	12.6(2.06)	36.5(1.57)	45.7(1.03)	71.7(1.63)	—	—	—
	C57BL/6	43.6(1.01)	85.4(1.13)¶	106.2(1.17)¶	73.1(1.22)	75.8(1.14)†	60.0(1.19)	42.1(1.25)	42.3(1.29)	68(1.21)	36.3(1.25)
IL-12	BALB/c	49.1(1.29)	71.3(1.13)	51(1.25)	64.8(1.18)	19.4(1.68)	19.4(1.68)	83.6(1.18)	—	—	—
	C57BL/6	44.6(1.24)	69.6(1.15)	85(1.26)	57.3(1.95)	31.5(1.26)	76.2(1.26)	87.1(1.23)	109.5(1.23)†	53.8(1.14)	43.2(1.40)
FGFb	BALB/c	216.8(1.12)	249.4(1.26)	225.8(1.43)	114.7(1.73)	75.2(1.57)	124.2(1.40)	200.8(1.29)	—	—	—
	C57BL/6	262.4(1.19)	507.2(1.03)†	452.8(1.06)†	250.21(43)	33.3(1.25)	276.61(23)	403.4(1.03)	374(1.05)	406.1(1.08)	343.7(1.11)
IP10	BALB/c	23.4(1.21)	42.9(1.70)	209.8(1.47)¶	243.3(1.88)†	165.9(1.75)†	73.1(1.81)	84.0(1.76)	—	—	—
	C57BL/6	25.1(1.32)	6.1(1.37)	94.0(1.34)†	17.8(1.12)	17.7(1.04)	20.3(1.05)	24.6(1.30)	19.2(1.03)	2.7(3.70)	25.6(1.50)
KC	BALB/c	260.7(1.40)	155.7(2.36)	1501(1.29)¶	1706(1.35)¶	1610(1.72)†	236.3(3.19)	532.8(2.14)	—	—	—
	C57BL/6	73.0(1.06)	96.7(1.18)	188.9(1.55)	282.4(1.58)†	38.6(1.49)	102.7(1.49)	67.9(1.03)	72.6(1.05)	114.0(1.52)	77.5(2.09)
MCP-1	BALB/c	21.5(1.04)	13.3(1.05)	67.0(1.37)†	61.8(1.96)	107.5(1.70)†	53.5(1.35)†	34.9(1.15)†	—	—	—
	C57BL/6	20.6(1.03)	21.1(1.35)	44.6(1.19)†	29.1(1.18)	18.4(1.13)	21.9(1.12)	23.0(1.18)	28.0(1.22)	29.9(1.24)	26.2(1.14)
MIG	BALB/c	184.4(1.16)	291.8(1.21)	1854(1.13)§	1866(1.07)§	934.9(1.31)¶	1027(1.76)†	1405(1.54)¶	—	—	—
	C57BL/6	9.1(1.14)	133.6(1.22)¶	2149(1.02)§	440.8(1.38)	88.4(1.51)¶	147.4(1.28)§	342.5(1.19)§	81.8(1.22)¶	114.5(1.35)§	186.8(1.19)§
MIP-1 $\alpha$	BALB/c	39.6(1.03)	21.9(1.06)	29.6(1.07)	32.1(1.15)	95.1(1.37)†	99.7(1.79)	25.4(1.24)	—	—	—
	C57BL/6	18.3(1.55)	26.6(1.03)	26.5(1.07)	31.6(1.08)	24.6(1.05)	10.5(2.27)	5.7(1.44)	14.3(1.37)	42.5(1.02)	51.8(1.05)
VEGF	BALB/c	12.3(1.31)	23.7(1.41)	6.8(1.72)	6.6(1.87)	6.7(1.22)	14.7(1.80)	15.6(1.65)	—	—	—
	C57BL/6	2.6(2.32)	4.8(1.15)	5.1(1.24)	3.0(1.49)	5.8(1.05)	3.8(1.41)	2.3(1.45)	6.0(1.05)	6.4(1.03)	6.3(1.02)

<sup>a</sup> Cytokine/chemokines were reported as geometric means with the geometric standard error of the means.<sup>b</sup> N was equal to 5 for each mouse strain at each time point post-infection (PI). Dashes (—) represent no data because no mice were left at that time.<sup>c</sup> For geometric means for the naïve mice, n was equal to 10 for BALB/c mice, and n was equal to 4 for C57BL/6 mice.<sup>d</sup> For significant levels compared to the naïve, control mice: †P<0.05; ¶P<0.01; §P≤0.001.

UNCLASSIFIED

Table S6. Cytokines/chemokines in spleen extracts from BALB/c and C57BL/6 mice after aerosol challenge with *B. pseudomallei* K96243.

Cytokine/ Chemokine	Mouse Strain <sup>b</sup>	Naïve <sup>c</sup> , Control	0 <sup>d</sup>	Amount Cytokine/Chemokine Expressed (pg/ml) <sup>a</sup>								
				Time (Days PI)	2	4	7	15	22	28	59	90
IFN- $\gamma$	BALB/c	20.2(1.09)	10.4(1.14)	207.1(1.62)¶	25.6(1.40)	177(1.78)†	266.1(1.38)¶	280.4(1.34)§	—	—	—	—
	C57BL/6	15.2(1.04)	10.7(1.10)	98.5(1.62)†	14.4(1.12)	19.6(1.43)	154.2(1.32)§	154.3(1.19)§	163.1(1.07)§	15.1(1.02)	17.4(1.09)	
TNF- $\alpha$	BALB/c	12.6(1.17)	20.1(1.03)†	25.1(1.10)¶	20.5(1.03)†	28.1(1.07)§	125.9(1.96)†	63.3(1.55)†	—	—	—	—
	C57BL/6	23.3(23.3)	19.9(1.03)	25.5(1.06)	26.3(1.12)	20.8(1.05)	46.5(1.24)†	23.1(1.06)	15.2(1.36)	24.9(1.03)	23.3(1.05)	
IL-1 $\alpha$	BALB/c	75.8(1.10)	170(1.11)§	651.9(1.32)¶	304.9(1.22)¶	1643(1.45)§	1963(3.28)	750.8(1.88)†	—	—	—	—
	C57BL/6	45.9(1.19)	139.2(1.11)¶	339.6(1.19)§	303.2(1.32)¶	225.4(1.06)¶	271.1(1.42)¶	24.4(1.06)	90.4(1.51)	252.4(1.08)§	230.4(1.45)¶	
IL-1 $\beta$	BALB/c	38.9(1.23)	97.6(1.10)¶	303.2(1.35)§	207.2(1.30)§	798.9(1.26)§	1296(1.45)§	982.3(1.45)§	—	—	—	—
	C57BL/6	21.1(1.10)	51.1(1.11)§	138.6(1.27)§	190.1(1.62)¶	180.6(1.22)§	241.5(1.85)†	182.7(1.26)§	220.9(1.14)§	164(1.10)§	197.4(1.40)¶	
IL-2	BALB/c	7.30(1.15)	8.90(1.02)	11.4(1.07)†	9.90(1.06)	12.1(1.06)¶	71(1.05)§	67.1(1.05)§	—	—	—	—
	C57BL/6	3.30(1.08)	9.20(1.02)§	11.2(1.05)§	10.1(1.08)§	9.91.03)§	73.5(1.07)§	58.3(1.03)§	59.2(1.03)§	14.4(1.08)§	14.4(1.06)§	
IL-4	BALB/c	24.7(1.10)	10.5(1.29)	23.2(1.16)	10.3(1.43)	27.6(1.41)	412.0(1.43)¶	458.2(1.11)§	—	—	—	—
	C57BL/6	20.1(1.04)	32.0(1.10)†	28.2(1.26)	9.70(1.39)	17.6(1.26)	673.5(1.11)§	497.6(1.09)§	522.2(1.07)§	21.8(1.14)¶	24.1(1.45)	
IL-6	BALB/c	22.4(1.10)	33.0(1.02)¶	45.7(1.11)§	32.5(1.01)¶	63.5(1.19)¶	114.5(2.09)	101.6(1.43)†	—	—	—	—
	C57BL/6	29.5(1.01)	31.7(1.04)	38.6(1.08)†	36.4(1.16)	32.6(1.03)†	61.5(1.35)	60.2(1.26)†	23.8(1.44)	31.3(1.28)	24.8(1.21)	
IL-10	BALB/c	26.2(1.07)	75.1(1.35)†	116.7(1.22)§	86.7(1.21)¶	145.0(1.11)§	268.2(1.26)¶	126.2(1.23)§	—	—	—	—
	C57BL/6	35.6(1.14)	85.3(1.21)¶	109.4(1.23)¶	117.7(1.17)§	134.7(1.19)§	234.2(1.27)§	83.6(1.26)†	116.4(1.30)¶	122.4(1.06)§	99.2(1.07)¶	
IL-12	BALB/c	19.1(1.23)	25.2(1.23)	23.7(1.29)	26.9(1.45)	14.3(1.99)	283.0(1.26)§	359.0(1.08)§	—	—	—	—
	C57BL/6	28.5(1.19)	29.1(1.21)	54.0(1.20)†	56.2(1.45)	42.8(1.36)	290.1(1.24)§	166.0(1.20)§	242.4(1.09)§	77.8(1.10)¶	51.4(1.15)†	
FGFb	BALB/c	489.4(1.21)	3456(1.06)§	1613(1.12)§	1964(1.34)¶	2363(1.28)§	1719(1.17)§	1254(1.25)†	—	—	—	—
	C57BL/6	313.8(1.02)	2431(1.17)§	2152(1.06)§	3841(1.22)§	3086(1.19)§	739(1.39)	272.0(1.10)	503.8(1.28)	2967(1.06)§	1629(1.15)§	
IP10	BALB/c	19.5(1.05)	41.4(1.07)§	281.1(1.43)¶	86.3(1.10)§	177.0(1.24)§	67.9(2.12)	45.8(1.77)	—	—	—	—
	C57BL/6	24.8(1.33)	62.5(1.13)†	377.2(1.39)§	154.5(1.26)¶	120.1(1.23)¶	20.8(1.06)	18.4(1.03)	19.4(1.04)	45.6(1.06)	34.2(1.16)	
KC	BALB/c	350.8(1.04)	243.8(1.11)	372.3(1.10)	303.3(1.05)	573.6(1.25)	1629(1.46)†	970.6(1.45)	—	—	—	—
	C57BL/6	206.5(1.07)	243.1(1.04)	260.5(1.09)	357.6(1.13)¶	351.4(1.14)†	707.6(1.12)§	174.5(1.32)	256.9(1.30)	230.0(1.17)	277.1(1.18)	
MCP-1	BALB/c	18.2(1.12)	14.7(1.04)	25.9(1.18)	16.31.02)	30.8(1.20)†	76.4(1.47)†	51.5(1.63)	—	—	—	—
	C57BL/6	13.3(1.08)	15.0(1.04)	23.6(1.15)†	22.9(1.18)†	23.1(1.14)¶	28.5(1.08)§	21.5(1.04)¶	20.2(1.02)¶	8.0(1.10)	11.6(1.34)	
MIG	BALB/c	142.1(1.09)	871.1(1.17)§	3494(1.36)§	1813(1.19)§	4313(1.16)§	3197(1.25)§	1905(1.50)¶	—	—	—	—
	C57BL/6	216(1.41)	865.5(1.16)†	3799(1.21)§	1401(1.43)¶	1900(1.26)¶	1189(1.19)¶	299.9(1.31)	421.2(1.30)	1173(1.0)†	789.6(1.24)†	
MIP-1 $\alpha$	BALB/c	59.3(1.12)	46.9(1.05)	89.4(1.17)	80.6(1.23)	160.2(1.41)†	688.2(2.46)	288.7(1.46)†	—	—	—	—
	C57BL/6	26.4(1.23)	43.6(1.05)	68.5(1.10)†	75.6(1.24)†	53.7(1.06)†	161.0(1.14)§	88.2(1.10)¶	108.0(1.10)¶	86.4(1.18)¶	89.1(1.11)¶	
VEGF	BALB/c	13.5(1.05)	12.4(1.09)	47.8(1.18)§	37.5(1.25)¶	33.4(1.23)†	293.4(1.98)†	111.4(1.52)¶	—	—	—	—
	C57BL/6	4.6(1.07)	7.60(1.13)†	32.1(1.21)§	24.4(1.30)¶	50.7(1.45)¶	66.2(1.60)¶	2.70(1.64)	9.70(1.49)	12.7(1.38)†	35.3(2.22)	

<sup>a</sup> Cytokine/chemokines were reported as geometric means with the geometric standard error of the means.<sup>b</sup> N was equal to 5 for each mouse strain at each time point post-infection (PI). Dashes (—) represent no data because no mice were left at that time.<sup>c</sup> For geometric means for the naïve mice, n was equal to 10 for BALB/c mice, and n was equal to 4 for C57BL/6 mice.<sup>d</sup> For significant levels compared to the naïve, control mice: †P<0.05; ¶P<0.01; §P≤0.001.